
**Pharmacy Data Transaction Services
(PDTS)**

INTERFACE CONTROL DOCUMENT

FOR

**TriCare Mail Order Pharmacy
(TMOP)**

NCPDP Version 5.1

COMPUTER SCIENCES CORPORATION
WebMD

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PDTS ICD FOR TMOP

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Change Summary of Current ICD Release

Page 2	Contact Section Revised
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Page 5	Revision date clarified. There was no 30 January 2003 release therefore the date was removed from the list.
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I. INTRODUCTION

This Interface Control Document (ICD) outlines criteria by which TMOP Prescriptions will be edited, captured and reported on the PDTS system. It also describes how TMOP transactions processed on the PDTS system will be interfaced with other government systems. Close adherence to the ICD contents, as well as thorough verification of its completeness and accuracy, will ensure timely/accurate administrative processing, clinical processing and global integrated patient drug profiles. The contents were assimilated from conversations and correspondence with representatives of The Department of Defense, TriCare, TED, CDCF and DEERS.

Modification of the ICD and the PDTS System will be made by WebMD when directed by The Department of Defense. Notification must be made in writing.

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III. SCOPE

- **Demographics (Historical Approximations)**
 - 100,000,000 DoD Prescriptions Annually
 - 4,600,000 Mail Order Prescriptions Annually
 - 50,000 Pharmacies in Managed Care Support Contractors Networks
 - 587 Military Treatment Facilities
 - 1 TriCare Mail Order Pharmacy
- **Submission: Transactions will be submitted electronically at the time of dispensing**
- **Services to be Provided:**
 - Integrated Profiles (Rx's from MTF's, TMOP, MCSC)
 - Real Time Eligibility Verification (DEERS)
 - Real Time Compliance with MCPF pricing
 - Prospective Drug Utilization Review
 - Payer Administration (via TED)
 - Coordination of Benefit (determination of OHI status)
 - Integrated Management Reporting
 - Batch update CDCF deductible/max benefit balances
- **Objectives:**
 - Cost Effective ProDUR Program
 - Electronic Processing and Billing of Prescriptions
 - Portable PDTS/DoD interfaces
 - Management Information
- **Approach:**
 - Verification of submitted patient, drug and pricing data will be established by PDTS through real time interface with DEERS, and accessing PDTS housed OHI and MCPF data.
 - Post Processed Data will be invoiced to TED.
 - PDTS will utilize transactions received from TMOP to update the patient's profile.
 - PDTS will perform DoD defined ProDUR edits. TMOP Submitted data and PDTS response data will be captured and inserted into a data warehouse for the purpose of management reports. Data will be distributed to Government entities that secure a data sharing agreement.
 - PDTS will capture and record all information that is submitted, but will edit against only required fields as indicated in Section VIII.
 - Data will be maintained on the Data Warehouse for 2 years. After 2 years, data will be archived indefinitely.
Note: Requirements to retain warehouse data for 5 years are being evaluated.
 - Prescriptions will be maintained for on-line profiles for 15 months from the date of the last fill. Prescription data will be maintained for help desk access for 2 years. Prescription data will archived indefinitely after 2 years.
 - TMOP will systematically screen response from the PDTS System.
 - Two resources are available to the TMOP to assist in supporting PDTS transaction. A toll free help desk will be established at the PharmacoEconomic Center in San Antonio. Remote Access client software will be provided to the TMOP to enable it to access the PDTS help desk screen. This will provide the TMOP with secure access to patient's profiles and related dispensing information.
 - Batch interface will be established with CDCF for the purpose of exporting daily updates to deductible and maximum benefit balances

IV. Architecture Solution

Introduction:

This chapter is intended to provide an overview of the proposed System Architecture Solution for processing transactions from the TriCare Mail Order Pharmacies (TMOP). The WebMD portion of this solution will actually consist of several different computer systems, which we will classify under the general headings of PDTS Switch and PDTS Processor. This document outlines the components and functionality of the PDTS Switch and the Primary and Secondary PDTS processors located in redundant PDTS sites.

The proposed solution calls for two PDTS Switches located in two separate WebMD facilities. Both of these PDTS Switches will be reachable by the TMOP. Under normal conditions the TMOP, will load balance traffic between both PDTS Switches. In the event one PDTS Switch should become unreachable or inoperative, all transactions will be sent to the remaining functional PDTS Switch.

Data Flow:

The transaction request is transmitted from the TMOP to one of the redundant PDTS Switches (Nashville, TN and Twinsburg, OH). The PDTS Switches transfer transaction requests to the PDTS Processor at the primary Processing Center in Twinsburg, Ohio. Transaction responses from the PDTS Processors are sent to the PDTS Switch that forwarded the transaction request. The PDTS Switch returns the transaction response to the TMOP. The Disaster Recovery Site in Nashville will only be used in the event of a catastrophic failure at the primary site. Notification of processing at the Disaster Recovery Site will be according to established escalation procedures. WebMD will be responsible for reconciling profiles before returning processing to the primary Processing Center. A failover solution has been implemented to keep the databases at the primary and disaster recovery site synchronized. Details of the failover solution can be found later in this document.

TMOP - PDTS Switch Interface:

Each TMOP server will establish and maintain at least one TCP/IP bi-directional socket connection to each PDTS Switch.

From the perspective of an individual TMOP, each PDTS Switch is simply a TCP/IP application listening on a particular port and handling transactions. The TMOP will be responsible for maintaining and utilizing connections to each active redundant PDTS Switch.

To submit transactions, each TMOP will need to open a TCP/IP connection to the PDTS Switch listen port (e.g. 2001). Upon a successful connection the Submitting Host can then send transactions using the multithreading model described later in this document.

Each transaction will be formatted using approved NCPDP variable standard. CHCS will communicate with the PDTS Switches using External Normalizing Protocol (ENP) to handle message transport of NCPDP transactions across a bi-directional TCP/IP socket. The NCPDP transaction must be encapsulated in the data segment of an ENP message (see ENP description later in this document for details). Each ENP message must then be encrypted using 3DES as per the CHCS proposal of 12/15/98 or a subsequently approved method.

Each ENP message/transaction must contain a unique sequence number. The Sequence number field of the ENP header is utilized for tagging transaction responses to their corresponding request and is crucial when multithreading is used. This Sequence number must be unique for each message/transaction until the connection is closed. The sequence number can be repeated, but must be unique for each transaction (claim and reversal) for a minimum of 24 hours.. The uniqueness of the sequence number is required only on a per TMOP basis. The same sequence number may occur at a non-TMOP dispensing facility. The Source field will be an agreed upon value representing the specific submitting TMOP.

The Destination field will be PDTS unless the ENP header itself is corrupted or malformed. Connection problems or processing errors will all be encoded within the NCPDP transaction returned in the data segment of the response.

Telecom Multithreading:

When multithreading is used, queries and responses are handled in an asynchronous fashion. Meaning, multiple transactions can be in flight at any one time because each ENP message pair (request and response) will have the same unique identifier in the sequence field. Each TMOP can submit new request messages without waiting for responses to previously submitted requests

Data Security:

The requirement for encryption of transactions has been addressed through the use of VPN hardware. Additional details are provided in section V. Network Architecture.

The PDTs Switch:

Each PDTs Switch listens on a pre-established, bi-directional socket for connections from an individual TMOP. It establishes connections to the current PDTs processor in use. It maintains a table of in-flight messages from an individual TMOP to match responses to requests.

ENP Message Description:

This section describes the TCP/IP communications protocol message layout for connections inbound to the PDTs Switch.

The following specifies the message format between endpoints.

<u>Position</u>	<u>Length</u>	<u>Contents</u>
1-3	3	Start of Message Sequence (hex DF, 2C, DF)
4-5	2	ENP Version = "02"
6-7	2	Record Type = "CQ"
8-15	8	Sequence Number = Unique number assigned by the TMOP
16-19	4	Source = "TMOP"
20-23	4	Destination = "PDTs"
24-27	4	Data Length Varies
28	1	Start of Data Delimiter (hex E0)
29-n	n	Data
n+1	1	End of Data Delimiter (hex E1)

NOTES

Start of Message Sequence (Position 1-3)

Transactions having an improper Start of Message Sequence 223,223 (hex DF, 2C,DF) will not be recognized as valid data and will be discarded without a report sent back to the client.

ENP Version (Position 4-5)

The client must supply a proper version number in positions 4-5. Transactions that do not have the same version number as the WebMD process accepting the claim will be returned to the client with the error message: "Wrong Version".

Record Type (Position 6-7)

For any claim sent to WebMD, the client must include the character sequence of "CQ" in positions 6-7. Clients who want to submit "dummy" transactions may include a character sequence of "DQ" in position 6-7. Claims that do not have either a "DQ" or "CQ" in position 6-7 will be returned with the error message: "Invalid ENP Type".

All responses to type CQ claims will be returned by WebMD with a "CR" in position 6-7. NOTE: All claims which have any ENP header error described in this document will be sent back with an "ER" in positions 6-7. Those that have routing errors will be returned with an "SE" in positions 6-7. Responses to "dummy" transactions will have a "DR" in positions 6-7.

Sequence Number (Position 8-15)

The client uses position 8-15 to supply a sequence number for the claim being sent. This field can be filled with ASCII characters in the numeric range (0x30 to 0x39), or in the alphabetic range (upper case: 0x41 to 0x5a) (lower case: 0x61 to 0x7a). Special Characters are NOT ALLOWED. If the customer wants to multi-thread claims, the sequence number must be unique for each transaction (claim and reversal) for a minimum of 24 hours.

Claims that have a value that is not alphanumeric in position 8-15 will be returned with the error message: "Non Alphanumeric Sequence Number". NOTE: WebMD will make a best effort to return claims that have any ENP error with the customer generated sequence number. Many error conditions covered by the ER type indicate that the ENP header is invalid; therefore it may not be possible to return the sequence number on all ER messages. The sequence number will always be returned on all CR, DR, and SE messages.

The Sequence Number is also used by PDTs in editing for duplicate transaction caused by communication problems. These duplicate transactions are considered Phantom Claims. Phantom Claims logic uses the following fields to determine if this claim has already been processed: Sequence Number, Processor Control Number, NCPDP Number, Prescription Number and Date Filled. When the claim is received on the PDTs processor, it will check to see if that combination has already been processed. If the PDTs finds that this is a Phantom Claim, a duplicate claim response will be returned.

Source (Position 16-19)

The client must fill positions 16-19 with a source value supplied by WebMD. This four-byte field uniquely defines the client. Any claim that does not contain the source value that was supplied by WebMD ca will be returned to the client with the error message: "Incorrect Value in Source Field".

Destination (Position 20-23)

The destination field should be filled with the value assigned by WebMD. NOTE: Claim Responses (type "CR") that the client receives back from WebMD will have the source and destination fields in opposite order to the way that it was sent. NOTE: in the case of ER messages, it may not be possible to correctly determine the source and return it as the destination. The source field will be populated by 'X's in this case.

Data Length (Position 24-27)

The client MUST use position 24-27 to fill in the number of bytes that are in the claim that is being sent – this count ONLY includes the number of bytes in the pharmacy claim and does NOT include a count of any header data, and does NOT include the SDD (Start Data Delimiter) or EDD (End Data Delimiter) characters.

If this field contains ASCII characters outside of the numeric range (0x30 to 0x39), the claim will be returned with the error message: "Data Length contains non-numeric char". If the claim contains an incorrect *value* an error will be returned indicating that an EDD could not be found (see below).

Start of Data Delimiter (Position 28)

Position 28 MUST contain the character 224 (hex 0xE0). This is the Start of Data Delimiter. If position 28 does not contain this character the claim will be returned with the message: "Missing ENP_STX".

End of Data Delimiter

The End of Data Delimiter is character 225 (hex 0xE1), and must follow the last byte of the pharmacy claim. When the receiving process at WebMD receives a claim, this position is calculated by adding the length of the header (28 bytes) to the length of the claim, which is determined from the Data Length field. If an EDD character is not found at this calculated position the claim will be returned with the message: "Missing ENP_ETX".

ENP Error Messages

As noted in the description of the type field, there are two kinds of errors encoded within the ENP header.

ER: The ENP Error Response type is used to indicate a problem with the ENP protocol itself. Such errors could result from incorrect implementation, or a data corruption problem introduced by the communication

Errors of this type will be differentiated by returning an error string within the data segment (Positions 29-n).

It should be noted that more than one thing could be detected as incorrect. Therefore all errors text messages of the ER type will begin:

"NN ENP errors found in last read. ENP ERROR LIST>>>>>>"

Note that the double quotes are used for clarity of documentation and will not appear in the error string itself.

Where NN is the number of errors found. The errors will be separated by the "*" character.

Possible error strings are:

1	"Wrong Version"	Version unsupported by this application.
2	"Non AlphaNumeric Sequence Number"	Something not A-z0-9 in sequence
3	"Data Length contains non-numeric char"	Something not 0-9 in length.
4	"Invalid ENP Type"	Type not one of CQ DQ
5	"Incorrect Value in Source Field"	Source field value not valid.
6	"Missing ENP_STX"	Data segment starting delimiter absent.
7	"Missing ENP_ETX"	Data segment closing delimiter missing.
8	"Zero Length Packet"	Query has no data.
9	Bad ENP start sequence	ENP start signature (pos. 1-3) missing or bad. WebMD will not return an error message; the transaction will be thrown away.

SE: The ENP Switching Error type is used to indicate a communication problem within the Online Transaction Processing System. The processing host either could not be reached or did not respond in time.

The data segment of the ENP message will contain the following when a problem occurs:

"TSHARED UNAVAILABLE"	The front-end interface on the PDTS switch is unable to logically connect to the switching function within the PDTS switch. This strongly implies severe problems on the PDTS Switch. WebMD Technical Support should be contacted.
"TSHARED NOT RESPONDING"	The front-end interface did not receive a response in time (e.g. timer "x+y" has expired) and has given up on this particular transaction. This is probably a transient error and the transaction should be resent.
"PDTS NOT RESPONDING"	The PDTS processor did not respond to the PDTS switch in time (e.g. timer "x" has expired) and has given up on this particular transaction. This is probably a transient error and the transaction should be resent.
"SWITCH UNAVAILABLE"	Reserved for future use
"PDTS UNAVAILABLE"	Reserved for future use
"PDTS UNAVAILABLE AND WAIT: 000000"	This response indicates there has been a transient error processing this particular transaction (e.g. record lock) and indicates that the transaction should be resent immediately.
"PDTS UNAVAILABLE AND WAIT: 001500"	This response indicates there has been a moderate error processing this particular transaction and it should not be resent for 15 minutes.
"PDTS UNAVAILABLE AND WAIT: 040000"	This response indicates there has been a severe problem processing this particular transaction and it should not be resent for 4 hours.

***More Error messages and the appropriate reaction may be published at a later date.**

DUMMY TRANSACTIONS

In order to test for complete end-to-end connectivity from the client application at the TMOP to the PDTS Processing host it is necessary to send a transaction. For ease of handling at the TMOP such transactions may be distinguished by enclosing them in an ENP with a "DQ" type. The response will be returned with a "DR" type. The handling of such transactions within the PDTS will be otherwise indistinguishable from normal "CQ" type queries.

TIMERS:

The timers are vital for keeping track of transactions as they are sent from an individual TMOP to the PDTS processor. In the event of a breakdown in the communication process, these timers become the triggering event to generate the error response that is sent to the appropriate TMOP.

Timer = X

This timer is used to track the amount of time the PDTS Switch back-end process will wait for a transaction response to the PDTS Processor. Should the timer be exceeded the error message **PDTS NOT RESPONDING** would be returned to the appropriate TMOP.

Timer = X + Y

This timer is used to track the amount of time the PDTS Switch front-end process will wait for a transaction response from the PDTS Switch back-end process (TSHARED). This timer should be the sum of the PDTS Switch back-end process timeout value "X" and the PDTS Switch front-end process timeout value "Y". Should the timer be exceeded, the error message **TSHARED NOT RESPONDING** would be returned to the appropriate TMOP.

Timer = X + Y + Z

This timer is used to track the amount of time an individual TMOP will wait for a transaction response from the PDTS Switch. This timer should be the sum of the PDTS Switch back-end process timeout value "X", the PDTS Switch front-end process timeout value "Y" and the appropriate TMOP timeout value "Z". Should the timer be exceeded, an appropriate error message, to be determined at the time of establishing communication connection with each individual TMOP, will be generated by the TMOP.

Contingency Plan for Handling PDTS Transactions Whenever PDTS Processing is Not Available

Extensive efforts have been made to provide maximum availability of the PDTS system. Alternate network connectivity options have been provided. Access to two geographically separated redundant PDTS connection locations is available. The primary PDTS processor system has a backup at the primary processing location. Another PDTS processor system will be located at a different location and will serve as the primary PDTS processor in the event disaster recovery is required. As a result of these efforts, occasions where PDTS processing will not be available should be infrequent. However, we must consider a design and procedures that will be used to address this situation should it occur.

QUEUES AND SOCKET CONNECTIONS

The TMOP will be provided access to a minimum of three socket connections. Two of these socket connections will be used for handling current transactions. One of these two sockets will connect to the Twinsburg, Ohio PDTS location and the other will connect to the Nashville, Tennessee PDTS location. Each of these two sockets is designed to handle the current queue transactions and supports multi-threading. Under normal circumstances current transactions are to be presented alternately between these two socket connections. The third socket connection is used to present transactions, which for whatever reason, have not been processed by the PDTS system.

BACKLOG QUEUE

Whenever the PDTS system is deemed totally unavailable, the TMOP processor would place all unprocessed transaction queries in the “backlog queue”. These transaction queries would be placed in the queue starting at the “front” of the backlog queue. Subsequent transactions would be placed behind this or toward the “back” of the queue. When placing a transaction in the backlog queue that was previously transmitted (without response) to PDTS, the “sequence number” should be the same as the original submission. The third socket connection would be used to take transaction queries from the front of the backlog queue and present these to the PDTS system. This socket connection would be “single-threaded”. The primary reason for single-threading these transactions over this socket would be to limit the instantaneous load on the PDTS system by limiting the TMOP to one outstanding transaction of this type at a time. This process would also guarantee the order of delivery of the transactions in the backlog queue. This is especially important when dealing with reversals.

The third socket connection can actually be used any time there are transactions that were unable to be processed using the current transaction socket connections. The application handling this backlog queue would look for the presence of transactions in this queue as a means of triggering the need to submit a transaction over this socket. It is understood this application will also first determine the availability of the PDTS system over this connection using the same logic used by the applications that handle the current transaction sockets. The third socket application will continue to present pending queries sequentially in a single threaded fashion until the backlog queue is empty. This application can run at all times which will enable these transactions to be presented immediately upon PDTS availability. This will keep the TMOP and PDTS databases as current as possible. This will therefore decrease the likelihood of the TMOP encountering a transaction for a patient that has a previous transaction not yet processed by the PDTS.

PROBLEM TRANSACTION FILE

In the interest in keeping the PDTS database as complete as possible, the TMOP system should supply the PDTS with all the necessary transactions. Under normal conditions this will occur over one of the two current queue socket connections. Should the PDTS be unavailable at the time the transaction is current, the backlog queue will be used to store and hold transactions until the PDTS is once again available.

In very rare instances it may be determined that a particular transaction exists such that, despite all normal attempts, PDTS has failed to supply a valid response to this transaction. It is not that the PDTS overall is unavailable, but only that a certain transaction is having difficulty. In such a case this transaction should be placed in a “Problem Transaction File”.

Dummy Transactions can be used effectively to make this determination. If the Dummy Transactions are not being responded to properly, then obviously attempts made at submitting other transactions will not be successful. The application should first determine PDTS availability by using Dummy Transactions. Transactions should only be placed in the problem transaction file only after several unsuccessful attempts have occurred, where each attempt has followed a successful response to a Dummy Transaction. If Dummy Transactions are not being responded to, then it is not appropriate to put transactions into the problem transaction file. These transactions should simply remain in the backlog queue until Dummy Transactions are properly responded to.

The purpose of this Problem Transaction File is to allow for manual investigation and correction of any situation causing a particular transaction to not be processed by the PDTS. Once addressed this transaction will likely become part of the patient's history. This is preferable to this transaction being discarded and the patient's history being incomplete. Transactions should only be placed in this file only when it is determined that the particular transaction is having a difficulty and not that PDTS is simply unavailable. (Other transactions are fine, just this particular one has a problem.)

A danger in the above scenario exists where a problem transaction has been identified and put in the problem transaction file and a reversal for that transaction follows. The reversal would like be responded to, but the response would be a rejected reversal. However, later when the problem transaction file is reviewed it may not be apparent that this transaction was actually reversed, unless that reversal information is also contained in the Problem Transaction File.

Therefore it is highly recommended that anytime reversals for transactions in the Problem Transaction File are encountered the reversal should also be included in that file.

Listed below are the recommended steps necessary prior to forwarding a Problem Transaction File to CSSC:

- Only transactions that receive a constant (TMOP has made several attempts to correct) non-reconcilable rejected response during a timeframe where other transaction submitted before and after the transaction in question are being accepted, should be written to the problem file. (Required)
- That before a transaction can be deemed as “non-reconcilable”, the TMOP may invoke the assistance of CSSC (and CSSC in return contacts WebMD) in order to address the cause of the rejection before writing to the problem file.
- The Problem Transaction File must be provided in the NCPDP standard claims submission format. (Required)

LOGIC TO DETERMINE QUEUE/FILE PLACEMENT

Whenever there exists a new transaction query to send to the PDTS system, the TMOP processor would first determine whether the transaction is a reversal. If it is not a reversal it would simply be placed in the current activity queue and sent to the PDTS system using one of the multi-threaded socket connections. If the transaction is a reversal, a check would be made to determine if the transaction being reversed is in the “Problem Transaction File”. If so, the reversal would be added to the Problem Transaction File. If not, a check would be made to determine if the transaction being reversed is in the backlog queue. If it is not in the backlog queue, it would simply be placed in the current activity queue and sent to the PDTS system using one of the multi-threaded socket connections. If it is in the backlog queue it would be placed at the end of the backlog queue so that the reversal will be processed by PDTS after the original transaction is processed.

Most of the time backlog queues or problem transaction files will not even exist. Therefore a check for the existence of either of these may be part of the logic. And even when a backlog queue or a problem transaction file exists, most transactions corresponding with a reversal will probably not be contained in either of these.

One other action to take occurs whenever a transaction is placed in the Problem Transaction File. A check of the backlog queue should also be performed to determine if a reversal for this transaction exists. If so this reversal should also be added to the Problem Transaction Queue for the same reasons already discussed earlier.

This is a general outline of the logic. The specific logic performed by the system would be best determined by the TMOP processor designers.

CONCLUSIONS

There are several key advantages of this general approach:

1. PDTS information is kept as current as possible following any unavailability of the PDTS system.
2. The load on the PDTS system following an interruption of PDTS processing availability is throttled by the single-threaded nature of the backlog queue socket.
3. All transactions are delivered to the PDTS consistently in the same fashion. No tapes, diskettes, file transfers, etc.
4. Only reversals for transactions that have a query being held in the backlog queue or that have been placed in the Problem Transaction File would be affected. The rest of the queries, which constitutes the majority, would occur as normal processing and with normal performance.
5. No transactions are discarded. There is a mechanism to collect any transactions that for some reason cannot be processed.

V. Network Architecture

Introduction:

This chapter and the attached network configuration diagrams are part of the Interface Control Document (ICD). This chapter details the proposed network architecture that will connect the TRICARE Managed Care Support Contractor's (MCSC) retail pharmacy networks (RPN) and non-network retail pharmacies (NNRP), and the TriCare Mail Order Pharmacy (TMOP), to the Pharmacy Data Transaction Service (PDTS), WebMD. The network has been designed to meet the functional requirements outlined in section 2.1.30 of the Integrated Pharmacy System/Pharmacy Data Transaction Service document.

Overview:

A single Frame Relay network has been proposed to provide a cost effective, redundant solution that will provide the bandwidth required to support the PDTS project. This single Frame Relay network will also provide a standard network solution for each TRICARE TMOP. Efforts have been made to build redundancy into the network to minimize disruptions in the event of a circuit or PDTS facility failure. In addition to the redundant Frame Relay solution, provisions have been made to support a dial backup solution that will allow the TMOP facility to re-establish connectivity should their local access port fail.

Connectivity will be established using a single Frame Relay network to connect each TMOP and their helpdesk facilities to the PDTS. Each claim processing facility will have a 56Kbps-access port and each helpdesk facility, or combined claim processing/helpdesk facility, will have a 128Kbps-access port. The facilities with a helpdesk have been given a larger access port to provide the bandwidth required in order to run the Citrix Secure ICA client application used to access data on the PDTS Processor. A Permanent Virtual Circuit, PVC, will be established from each individual TMOP facility to both the TN and OH PDTS sites. The committed information rate (CIR) for a processing facility's PVC will be 16Kbps, and for a helpdesk or combined processing/helpdesk facility the PVC will be 56Kbps. Each facility will have the capability to burst to the full data transfer rate, allowed by their access port, provided bandwidth is available on the network.

Redundancy has been built into the network, and PDTS system design, so that the TMOP facilities can continue sending transactions to the PDTS in the event one PDTS site becomes unavailable. Should an individual TMOP facility not be able to reach the PDTS due to a failure of their local Frame Relay access port a dial backup solution, implemented at each site, would automatically reestablish the connection to the PDTS system. The Cisco routers installed at each TMOP will be configured to sense a circuit failure and automatically reestablish a connection to the OH PDTS site using either 1 or 2 channels of an ISDN BRI. The number of channels used will be dependent upon the bandwidth requirements of a given facility. Transactions will continue to be sent over the ISDN connection until the Frame Relay service has been reestablished for a predetermined amount of time. At this point the ISDN connection will be dropped and transactions will be sent to the PDTS over the Frame Relay network.

Since all PDTS facilities involved will be required to maintain C2 security certification and accreditation in accordance with the DoD Orange Book, DoD 5200.28-STD Trusted Computer System Evaluation Criteria (TSEC), claim data will be protected through the use of a FIPS 140-1 compliant VPN (Virtual Private Network) solution. This solution requires installation of a VPNET VSU1010 unit at each TMOP facility transmitting to PDTS to maintain fundamental security compliance with regard to identification and authentication, access control, confidentiality, and availability (when used in conjunction with the dial backup solution). This solution will secure data traffic to and from each TMOP, by establishing an encrypted VPN tunnel or "pipe" between the TMOP VPN hardware and the hardware at each of the PDTS sites. The VPN solution does not just encrypt the transactions or helpdesk data per se, it creates an encrypted tunnel or "pipe" for the transactions or helpdesk data to pass through. The tunnel and the data within are encrypted. The VPN hardware solution will be installed on the TMOP networks in such a way that all data traffic bound for the PDTS will have to pass through it before being sent over the Frame Relay network or dial backup connection. The VPN hardware at the TMOP site will have previously setup an encrypted connection between itself and the VPN hardware located at the TN and OH PDTS sites. All data traffic sent between these sites, over the Frame Relay network or dial backup connection, are safe inside an impenetrable, encrypted "pipe" so that anyone trying to read the data through the use of a sniffer or by any other means will only see random ASCII characters. Once the data traffic reaches the remote VPN hardware, it leaves the encrypted tunnel or "pipe" and the data can once again be seen in its normal state. This is not considered a high risk since the data will be safe within the TMOP or PDTS facility. The VPN hardware solution eliminates the need to implement programming changes on the TMOP computer systems in order to encrypt and decrypt the transactions.

Bandwidth Estimates:

WebMD, using a total figure of 4 million transactions per year for the TMOP determined required bandwidth for the circuits. Based on typical traffic patterns seen by WebMD for transactions of this nature assuming 4 million transactions annually for the TMOP, an estimated peak day would see 25,741 transactions and an estimated peak hour of 2,307 transactions. Each transaction is estimated to be 800 bytes, consisting of a 350-byte request and a 450-byte response. The specified Frame Relay

circuits will provide the network bandwidth required during peak hours, utilizing approximately 7% of the 56 Kbps CIR for the MCSC. Additional bandwidth has been allocated in order to accommodate the bandwidth requirements of the Citrix Secure ICA application.

Network Architecture and Data Flow:

Three diagrams have been included in this chapter. The diagram labeled **MCSC/TMOP Socket Connection** (Diagram 5.1) illustrates persistent socket connections established between each MCSC or TMOP host and the PDTS Switches in OH and TN.

The second diagram labeled **MCSC/TMOP PDTS System Configuration** (Diagram 5.2) is a detail of the primary PDTS Processor.

The third diagram labeled **DoD/ WebMD Network Diagram** (Diagram 5.3) shows the proposed frame relay circuits that connect the MCSC and TMOP to the existing WebMD infrastructure.

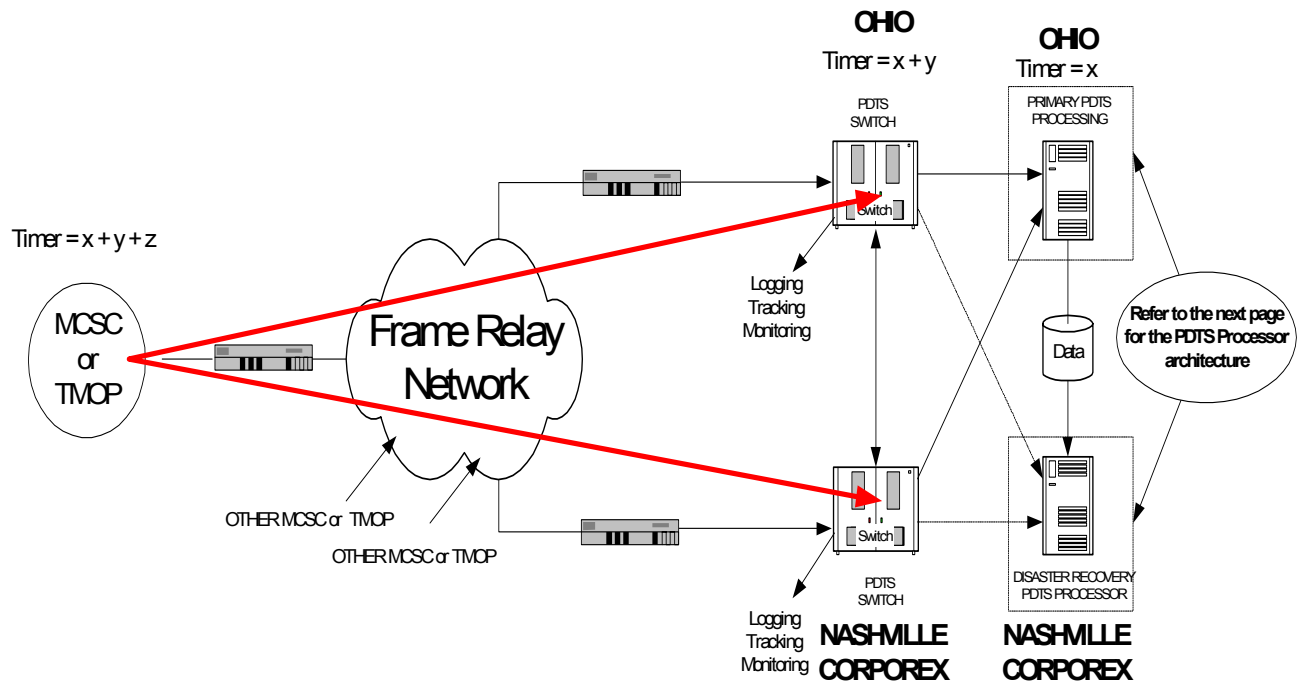
Note: The attached network diagrams should be referenced for this section.

- The TMOP will send transactions over persistent bi-directional TCP/IP socket connections established with the OH and TN PDTS Switches.
- The TMOP is responsible for monitoring socket connections and taking appropriate action if one or both connections are lost.
- Transactions will be load balanced by the TMOP between WebMD TN and WebMD OH PDTS Switches using a round robin algorithm.
- Transactions sent to the PDTS will travel over the Frame Relay network and enter WebMD's network via one of 2 Frame Relay access ports, one in TN the other in OH, to provide redundancy.
- Once the transaction reaches WebMD, the existing network infrastructure will be used to route data between WebMD's processing facilities.
- The transaction request from an individual TMOP is transmitted to one of the redundant PDTS Switches (Nashville, TN and Twinsburg, Ohio). The PDTS Switches transfer transaction requests to one of the redundant PDTS Processors at the primary Processing Center in Twinsburg Ohio. Transaction responses from the PDTS Processors are sent to the PDTS Switch that forwarded the transaction request. The PDTS Switch returns the transaction response to the TMOP. The secondary PDTS Processing Center will only be used should the redundant PDTS Processors at the primary site fail. Notification of secondary processing will occur according to established escalation procedures. WebMD will be responsible for reconciling profiles, and reestablishing processing at the primary Processing Center.

The guidelines for failing over the secondary systems and disaster recovery site are as defined in the "System Availability Memo of Understanding".

- Under normal conditions, the primary PDTS processor in OH will process transactions.
- Responses generated by the PDTS Processor will be returned to the TMOP and will be load balanced over the TN and OH frame relay circuits.

MCSC/TMOP Socket



Doc 5.1 2002.vsd

Diagram 5.1

PDTS SYSTEM ARCHITECTURE

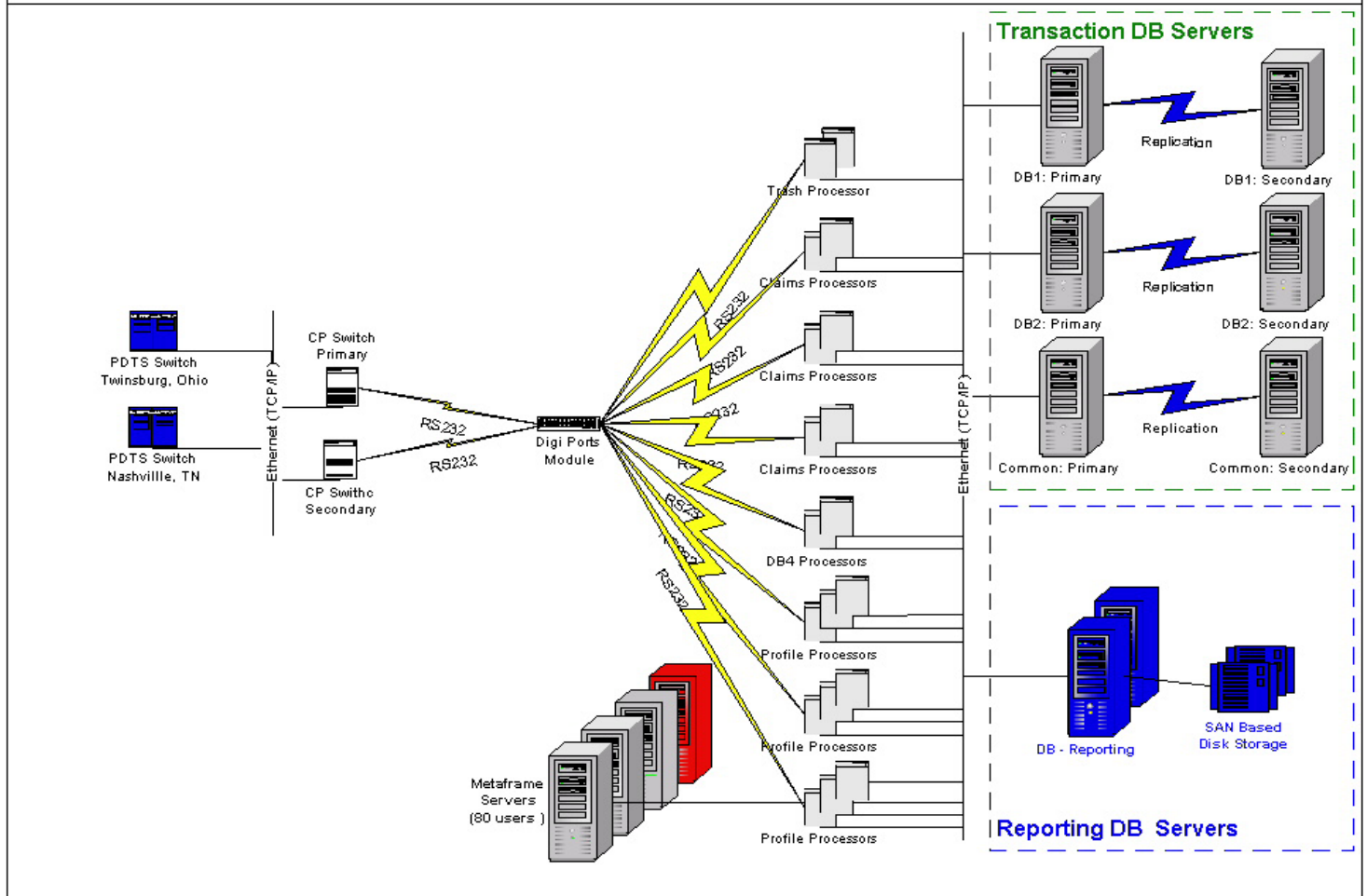


Diagram 5.2

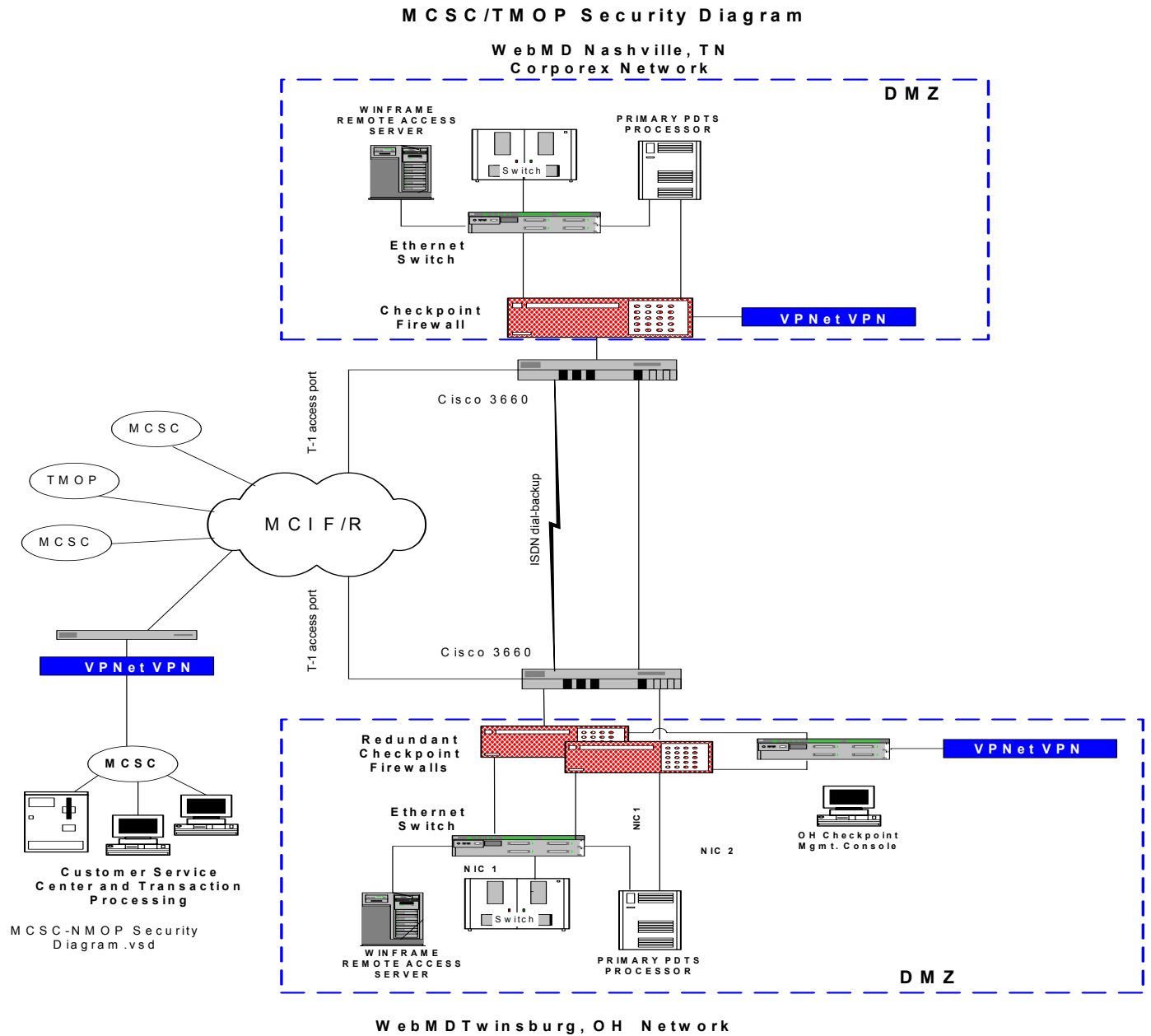


Diagram 5.3

MCSC/TMOP Network

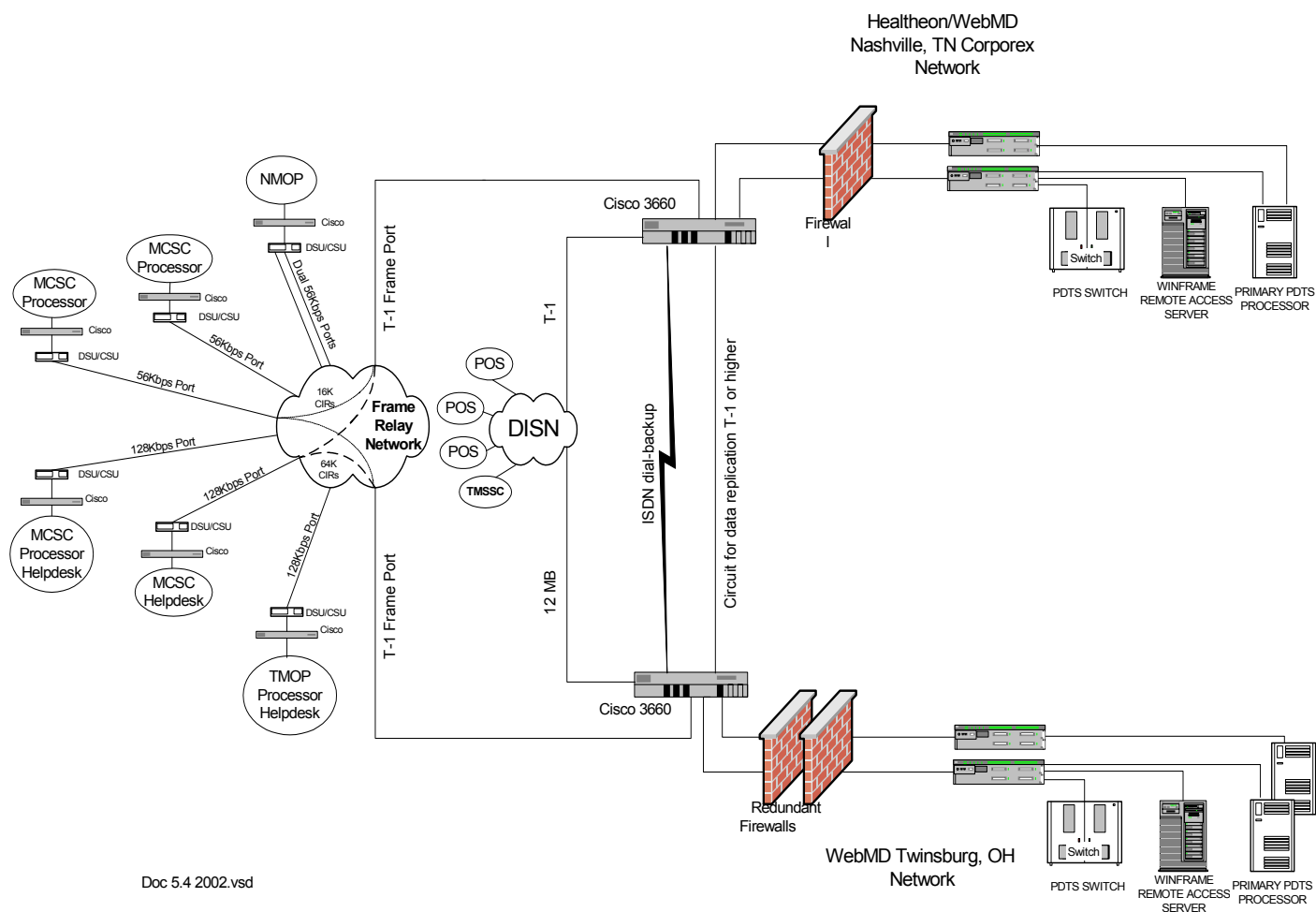


Diagram 5.4

MCSC/TMOP Dial Backup Solution

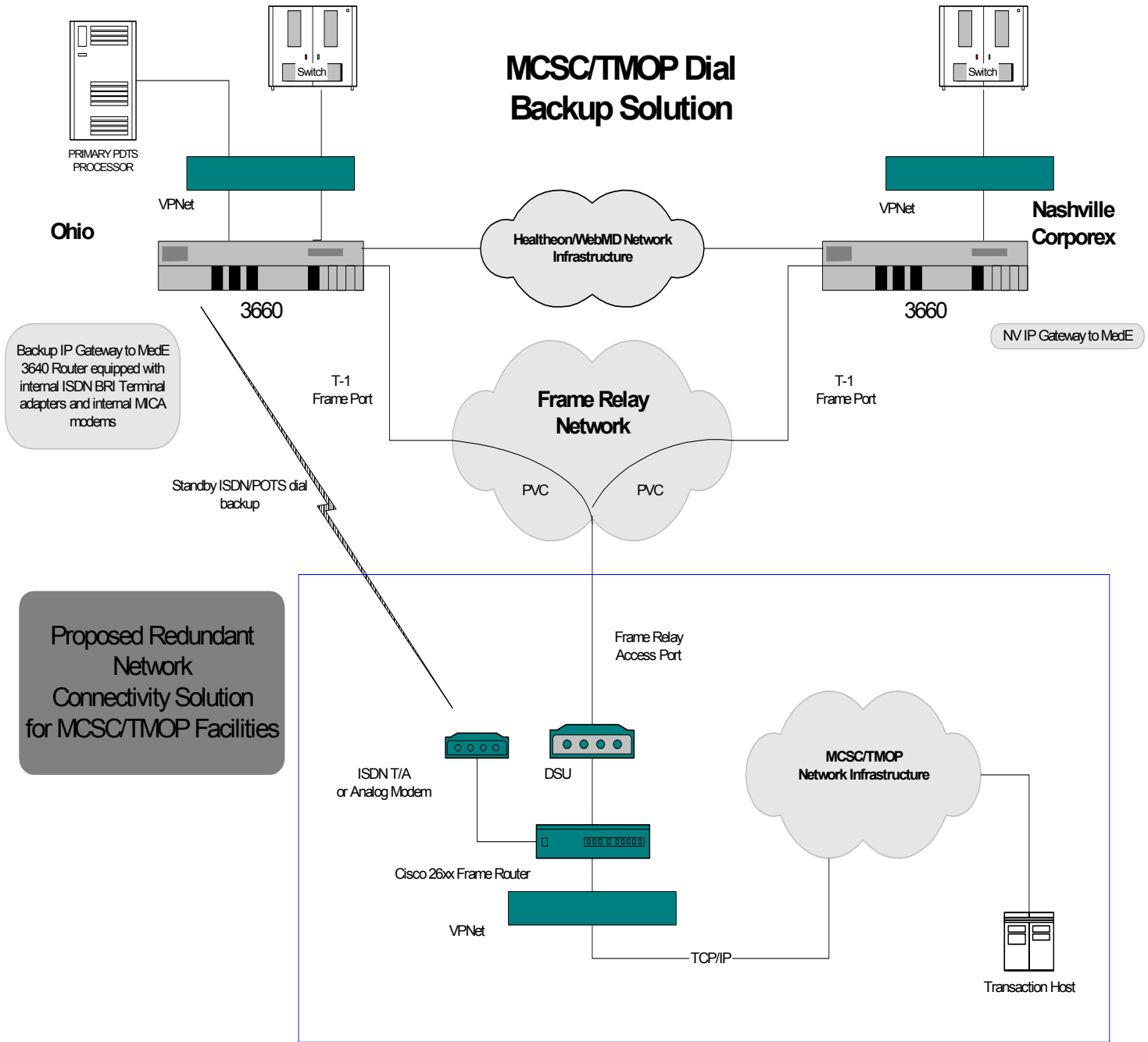


Diagram 5.5

VI. APPLICATION SOFTWARE DESIGN

Application Development Productivity

The PDTS software application is based on Magic Software Enterprises (MSE). This table-driven, code-free programming methodology *offers immediate design-to-execution* development life cycle and unsurpassed productivity. The rapid prototyping capabilities of Magic maximize end-user involvement during the development phase and ensure satisfaction with final application.

Rapid Application Development & Deployment (RADD)

Utilizing Magic's unique table-driven architecture, WebMD's Systems Development Life Cycle (SDLC) takes advantage of end-user functionality built into the Magic Application "Engine". This allows systems to be designed, prototyped and tested without writing lines of code. The application is an actual database file in which all data definitions, specifications and business objects of the application are stored. The developer needs only to specify the sequence of built-in functions and their parameters. At run-time, the Magic engine steps through the file to execute the application. The other powerful feature of WebMD's development environment is the use of Magic's form templates, which simplify the assembly of the Graphical User Interface (GUI).

Data Center Hardware Configuration

Online/Real Time Transactions: All online transactions submitted by providers are processed by front-end programs written in ANSI C. Transactions will be partitioned over multiple Data Servers, each running under Windows 2000 Advanced Server Operating System and each connected to disk arrays via Fibre Channel Hubs.

Each Disk Array will be initially configured with a capacity of 180 Gb with multiple Disk Arrays per server possible, with a capacity of 1.6Tb per Transaction Server. The data transfer rate of the Fibre Channel Switch and Hubs is 100MB per second. Each Data Server has a minimum of 1.5GB RAM. The "Common" server contains tables that are shared across all partitions (PDB Drug File, Pharmacy File, etc.) The "Current" Server contains the current transaction databases while the "History" server contains prior transactions. The segregation of data is necessary since the database software contains a file size limitation. Each Transaction Processing Server consists of dual Pentium Xeon processors.

Online Inquiry: The online query application is menu driven and allows remote users to view data in query mode. Authorized users are given rights to view information as it relates to their specific responsibilities and needs.

The number of TMOP concurrent users is limited by the maximum capacity of the Metaframe server, as designed by the DoD. The DoD will have the right to limit the number of workstations that can be loaded with the PDTS access software (Metaframe XP Client). Each User ID will have an automatic logoff function after five minutes of inactivity.

VII. DATABASES

➤ ELIGIBILITY

- Eligibility confirmation will be established through a PDTS real time interface with DEERS
- The PDTS system requires patients to be identified in one of the following fashions:
 - NEW Patient ID assigned by DEERS to each DoD beneficiary and their dependents. The new DEERS ID eliminates the use of Social Security Numbers to identify patients.
 - Sponsor SSN, Sponsor Name, Patient Name, Patient Date of Birth
 - Old DEERS ID uses the following convention:
 - Cardholder ID Number: DEERS Sponsor SSN and DDS (11 positions)
 - Date of Birth: DEERS Date of Birth

As each transaction is received by PDTS, it will interrogate the submitted Processor Control Number (PCN). Where the PCN indicates the transaction is from the TMOP the following will occur.

- a) If the patient ID number submitted by the TMOP is determined **NOT** to be a "Patient ID" number, **NOR** a "Legacy ID" housed on the PDTS Patient ID cross reference file then a combined "Patient ID Request" and "Patient Eligibility Request" transaction will be queued up by PDTS and sent to DEERS using the following DEERS query:

- **2.1.1.3 Sponsor/Dependent Inquiry**

- Sponsor Identifier
 - Sponsor Identifier Type Code
 - Sponsor Last Name
 - Sponsor Date of Birth
 - Person First Name
 - Person Date of Birth

If a match is made at DEERS on the submitted data, the DEERS response will contain the patient's new ID number as well as the eligibility status of the patient for the submitted pharmacy type. The new patient ID will be contained in the PDTS response as indicated in the transaction response section of the ICD.

It is possible that on a successful match that the DEERS inquiry will indicate the patient has no eligibility. If the patient has no eligibility, PDTS will reject the transaction using the NCPDP reject code of "65" (patient not covered).

If the DEERS response indicates that no match was found, PDTS will reject the claim using NCPDP reject code "07" (missing/ invalid ID number).

If the DEERS response indicates that the query resulted in ambiguous finding, PDTS will reject the transaction using NCPDP reject code "07" and a message of "Call CSSC for Patient ID". Message will be returned in the NCPDP field 504. CSSC phone number will be in the Help Desk Phone Number Field (550-8F). CSSC will provide the pharmacy with the correct ID information.

- b) If the Patient ID submitted by the TMOP is determined to be a new patient ID, OR if the TMOP submits a Legacy ID that PDTS has on its Patient ID cross reference file, PDTS will still query DEERS for the purpose of determining eligibility. DEERS responses regarding eligibility, will be handled as indicated in a) above.

(**Note:** Ambiguous response will not be a valid response for queries submitted with new ID).

PDTS will only make a single query each day for each unique patient ID received. Where multiple transactions are received in a single day for the same patient, PDTS will apply results from the first inquiry to all subsequent same day transactions. PDTS will be sensitive to the pharmacy type to ensure that handling of the transaction is pertinent to the pharmacy type on the subsequent transaction (e.g. the same type).

- c) On rare occasions, there will be former spouses that have coverage for specific disease states. These former beneficiaries will generate not eligible responses from DEERS to PDTS.

If the TMOP is asked to provide service to a former spouse with coverage of limited drugs for a previous existing condition it will be the patients responsibility to provide written documentation of this exception.

In order to bypass the eligibility rejection that will be returned by PDTS in these situations, the TMOP needs to do the following:

- Enter a "2" Override in the Eligibility Clarification Code Field (309-C9) to indicate eligibility documentation verified.

Note: This will be a one-time override and documentation must be presented by the patient at each dispensing.

WebMD is going to provide 3 files to "SEED" ESI records with "New Patient ID's". The first will be a test file to prove out the process. The second file will be a Preliminary load for Production purposes. The third file will be a repeat of the second file only based on more current information. The third file, which will be the last of the schedule transfers, will occur on a mutually agreeable date in Jan. The process can be repeated on an as needed basis if there is ever an event that results in an influx of new beneficiaries.

➤ **GROUP**

- The group number submitted on TMOP transactions will have no significance. Group Numbers stored on PDTS will be determined by Demographic data down loaded daily from DEERS.

➤ **PHARMACY**

- WebMD subscribes to NCPDP to maintain its Master Pharmacy File. PDTS requires the submission of NCPDP assigned providers numbers (formerly known as NABP numbers) to identify pharmacies. It will be the TMOP's responsibility to provide WebMD with a list on TMOP NCPDP pharmacy ID's.

➤ **PRICING**

The approach to real time pricing of TMOP transactions will be as follows:

- PDTS will house 2 MCPF price files that the TMOP claims will hit up against the abbreviated MCPF files.
- PDTS will capture ingredient costs as submitted.
- **TMOP compounds will be priced at submitted ingredient cost effective 8 December 2003.**
- PDTS will calculate MCPF price less discount, but do not include in online response. This price will be passed on the TED record.
- PDTS will generate two daily files. One containing claims when submitted price is X% greater than calculated MCPF price. The other file would contain claims where the calculated price is Y% less than MCPF price.
- **PDTS will program the ability to validate the submitted dispensing fee equal to the dispensing fee housed in the TMOP plan set-up. The dispensing fee was \$10.20 from 1 March 03 - 29 February 04. Beginning 1 March 04, the dispensing fee increased to \$10.51.**
- PDTS will program the ability to calculate TMOP copays. PDTS responses will contain the PDTS calculated copay. PDTS will return the amount of the copay adjustment in a message filed. Valid TMOP copays are \$0/\$3/\$9. The copays will be established in the TMOP plan set-up as follows:
 - A \$0 copay is calculated only if the beneficiary has a Copay Waiver Indicator returned from DEERS or if the CDCF flag has been set.
 - A \$3 copay is calculated if the drug is Generic.
 - A \$9 copay is calculated if the drug is Brand.

➤ **DEDUCTIBLE/CATASTROPHIC BALANCES**

- PDTS will update deductible and catastrophic cap balances through daily batch submissions CDCF until such time said balances are available/updateable through DEERS real time connection.

➤ **OTHER HEALTH INSURANCE**

PDTS will use stored Other Health Insurance (OHI) indicators as provided from multiple sources as well as OHI values stored on PDTS will be used to determine if TMOP transactions should be rejected. A patient that has OHI will automatically have their TMOP transactions rejected. Reject

Code will be "41" – Submit bill to Other Processor Primary Payer (indicates patient has OHI for which there may be a different mail provider).

If the TMOP determines that the OHI reject is not valid, the transaction may be resubmitted with an override value. The TMOP will be able to override OHI rejects by submitting a value of "1" in the Other Coverage Code Field (308-C8). This override will remain in effect until such time as the patients OHI data is revised.

➤ **Drug Database (First Data Bank NDDF)**

- WebMD subscribes to First Data Bank to maintain its formulary. Updates are applied on a weekly basis as telecommunicated each Friday night.
- The following First Data Bank values will be accessed in processing PDTS transactions:
 1. NDC #
 2. Drug Classifications:
 - a) Legend/OTC
 - b) Generic Code Numb
 - c) Drug Category Codes
 - d) Brand/Generic Indicator
 - e) Therapeutic Classes (GC3, AHFS, HIC)
 - f) Route of Administration
 - g) Maintenance Drug Indicators
 3. ProDUR Data
 - a) Drug Interaction Codes (Version 3.2)
 - b) Adult/Pediatric/Geriatric Codes Minimum Daily Dose
 - c) Adult/Pediatric/Geriatric Codes Maximum Daily Dose

➤ **TED**

During the generation of the TED record, there are two scenarios where we will add a second line item to the TED record even though the item was not submitted to PDTS on a transaction. The process will work as follows:

- ESI submits a claim to PDTS for either syringes/needles or test strips (syringes/needles are not just defined as insulin syringes/needles)
- When ESI received a paid response from PDTS, they will fill the identical quantity of alcohol pads (for syringes/needles) or lancets (for test strips) to each order
- ESI is paid one administration fee for this prescription fill and the patient is charged one brand (\$9) co-pay per prescription fill (up to 90 days)

When PDTS produces a TED record, it will contain two lines of data. First line will represent the NDC of the product sent by ESI, second line will be auto populated by either alcohol pads or lancets with a dispensing quantity equal to the quantity of syringes/needles or test strips dispensed. The TED record will be populated with only one co-pay and one admin fee. The TED will contain the acquisition cost of the auto-populated product. The TED will be used to track purchases of the auto-populated product from the Prime Vendor.

TMOP Option Year 2 CLIN Information:

CLIN	CLIN Description
2002AA	Prior Authorization Non-Accrual
2002AB	Prior Authorization Accrual
2004AA	Medical Necessity Non-Accrual
2004AB	Medical Necessity Accrual

VIII. TRANSACTION SUBMISSION

- Transactions processed by WebMD will be submitted electronically, in NCPDP version 5.1 format.
- Interface with ESI must be certified prior to submitting live transactions.
- TMOP dispensings where the only ProDUR conflicts are with non-TMOP dispensings will result in a claim response containing NCPDP conflict code and appropriate NCPDP advisory messaging. The determination of whether these messages are on an accepted or rejected response will be determined by the DoD direction as outlined in the "Point of Care Edits" section.
- TMOP dispensings where the only ProDUR conflicts are with other TMOP dispensings will result in a reject or advisory going back to the TMOP.
- TMOP dispensings that do not satisfy PDTs data requirements will result in a rejected claim response with the corresponding NCPDP reject code(s).
- Accepted/Rejected responses will be according to NCPDP formats as indicated in Sections 1.
- Transactions will be rejected if Other Health information is present on the profile. Override requirements are defined in Section XVI. Prior Authorization.
- The PDTs Transaction Submission Format is as follows:

1. BILLING SUBMISSION TRANSACTION

This section is fixed. Every position of every field needs to be provided.

Field	Name	Size	Type	Value	Edits/ Requirements
101-A1	BIN Number	6	N	600426	Required
102-A2	Version/Release Number	2	A/N	51	Required
103-A3	Transaction Code	2	A/N	B1 – Billing B3 - Rebill	Required
104-A4	Processor Control Number	10	A/N	DDb WebMD assigned number b=space	Required
109-A9	Transaction Count	1	A/N	1 – One Occurrence 2 – Two Occurrences 3 – Three Occurrences 4 – Four Occurrences	Required
202-B2	Service Provider ID Qualifier	2	N	07 - NCPDP Provider ID	Required, exact match required
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	Required
110-AK	Software Vendor/Certification ID	10	A/N	Spaces	Required

-- End of Fixed Section --

Patient Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	01 – Patient Segment	Required
FS	Field Separator	3		<FS> C4	
304-C4	Date of Birth	8	N		Required, must include month, day & year**
FS	Field Separator	3		<FS> C5	
305-C5	Patient Gender Code	1	N	NCPDP Value	Required***
FS	Field Separator	3		<FS> CA	
310-CA	Patient First Name	12	A/N		Required
FS	Field Separator	3		<FS> CB	
311-CB	Patient Last Name	15	A/N		Required
FS	Field Separator	3		<FS>CP	
325-CP	Patient Zip	15	A/N		Required

-- Transaction Continued --

Insurance Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	04 – Insurance Segment	Required
FS	Field Separator	3		<FS>C2	
302-C2	Cardholder ID	20	A/N		Required*. If known, this value must be the DEERS New Patient ID, 10-position numeric value. Where DEERS New Patient ID is unknown, enter sponsor's SSN. Legacy ID's are not supported.
FS	Field Separator	3		<FS>CC	Required
312-CC	Cardholder First Name	12	A/N	Sponsor first name	Required
FS	Field Separator	3		<FS>CD	Required
313-CD	Cardholder Last Name	15	A/N	Sponsor last name	Required
FS	Field Separator	3		<FS>C9	Required
309-C9	Eligibility Clarification Code	1	N	2 = Override	Required, to override DEERS Eligibility status of “Not Eligible”
FS	Field Separator	3		<FS>C1	
301-C1	Group ID	15	A/N	Branch of Military Code	Capture of submitted value not edited
FS	Field Separator	3		<FS>C3	
303-C3	Person Code	3	A/N	999	Required
FS	Field Separator	3		<FS>C6	
306-C6	Patient Relationship Code	1	N	NCPDP Value	Required

--Transaction Continued --

Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	07 – Claim Segment	Required
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	Required
FS	Field Separator	3		<FS>D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	Required
FS	Field Separator	3		<FS>E1	
436-E1	Product / Service ID Qualifier	2	A/N	03 - NDC	Required
FS	Field Separator	3		<FS>D7	
407-D7	Product/ Service ID	19	A/N	NDC Code	Required, Valid NDC
FS	Field Separator	3		<FS>E7	
442-E7	Quantity Dispensed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> D3	
403-D3	Fill Number	2	N		Required, even for value “00”-New Rx
FS	Field Separator	3		<FS> D5	
405-D5	Days Supply	3	N		Required
FS	Field Separator	3		<FS> D6	
406-D6	Compound Code	1	N	1-Not a Compound 2-Compound	Required, non-blank*****
FS	Field Separator	3		<FS> D8	
408-D8	Dispense As Written (DAW)/Product Selection Code	1	N	NCPDP Value	Required
FS	Field Separator	3		<FS> DE	
414-DE	Date Prescription Written	8	N	CCYYMMDD	Required
FS	Field Separator	3		<FS> DF	
415-DF	Number of Refills Authorized	2	N		Required
FS	Field Separator	3		<FS> DK	

Field	Name	Size	Type	Value	Edits/ Requirements
42Ø -DK	Submission Clarification Code	2	N	7 = Medically Necessary	Required if applicable
FS	Field Separator	3		<FS> C8	
3Ø8-C8	Other Coverage Code	2	N	1= No other coverage identified	Required to override OHI flag on PDTS
FS	Field Separator	3		<FS> EU	
461-EU	Prior Authorization Type Code	2	N	1- Prior Authorization	
FS	Field Separator	3		<FS> EV	
462-EV	Prior Authorization Number Submitted	11	N		Required when prior authorization number is applicable to the transaction*****

--Transaction Continued--

Prescriber Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø3 – Prescriber Segment	Required
FS	Field Separator	3		<FS> EZ	
466-EZ	Prescriber ID Qualifier	2	A/N	12 – DEA	Required
FS	Field Separator	3		<FS> DB	
411-DB	Prescriber ID	15	A/N	DEA	Required, Valid DEA #
FS	Field Separator	3		<FS> DR	
427-DR	Prescriber Last Name	15	A/N		Required

-- Transaction Continued --

DUR/PPS Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø8 - DUR/PPS Segment	Required
FS	Field Separator	3		<FS>7E	
473-7E	DUR/PPS Code Counter	1	N	1	
FS	Field Separator	3		<FS>E4	
439-E4	Reason for Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS>E5	
44Ø E5	Professional Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS>E6	
441-E6	Result of Service Code	2	A/N		Captured, used to validate provider/pharmacy override

-- Transaction Continued --

Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	11 – Pricing Segment	Required
FS	Field Separator	3		<FS>D9	
4Ø9-D9	Ingredient Cost Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS> DC	
412-DC	Dispensing Fee Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS> DX	
433-DX	Patient Paid Amount Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS>HA	
481-HA	Flat Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>GE	

Field	Name	Size	Type	Value	Edits/ Requirements
482-GE	Percentage Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>HE	
483-HE	Percentage Sales Tax Rate Submitted	7	A		Required, if applicable
FS	Field Separator	3		<FS>JE	
484-JE	Percentage Sales Tax Basis Submitted	2	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS> DQ	
426-DQ	Usual and Customary Charge	8	D	Format = S 9(6)v99	Optional
FS	Field Separator	3		<FS> DU	
430-DU	Gross Amount Due	8	D	Format = S 9(6)v99	Required*****

--Transaction Continued--

Clinical Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	13 - Clinical Segment	Required
FS	Field Separator	3		<FS> VE	
491-VE	Diagnosis Code Count	1	N	1	Optional
FS	Field Separator	3		<FS>WE	
492- WE	Diagnosis Code Qualifier	2	A/N	01 – ICD9	Optional
FS	Field Separator	3		<FS>DO	
424-DO	Diagnosis Code	15	A/N		Optional

--End--

NOTE: Required fields where the submitted value does not meet PDTS requirement will result in a reject transaction response.

- * Where the New DEERS Patient ID is known, it is to be submitted in the Cardholder ID Field (302-C2). New DEERS Patient ID should be used wherever possible. If new DEERS Patient ID is unknown, patient eligibility will be determined based on sponsor's last name as submitted in the Cardholder Last Name Field (313-CD) in combination with the Patient First Name Field (310-CA), Patient Last Name Field (311-CB) and Date of Birth Field (304-C4) submitted in the Patient Segment. If the legacy ID is the only means of identification available then the Sponsor SSN and DDS should be submitted in the Cardholder ID and the FSN submitted on the Person code on the Insurance Segment. For more information on PDTS eligibility see section VII.
- ** DATE OF BIRTH will be used to establish whether to use pediatric, adult or geriatric dose limitations, also used to link profiles between MTF and on non-military dispensings and when necessary to determine patient eligibility. Entire birth date (month, day and year) is required.
- *** Patient Gender Code will be used in combination with "Date of Birth to establish an "average" weight (based on National Average Weight Table published by FDB) in order to perform pediatric edits.
- ***** Compound Code: PDTS will support the "Most Expensive Ingredient Method" of handling compounds AND the "Multiple Ingredient Method" of processing compounds. If the compound value is set to "2" and only a single ingredient is provided, the "Most Expensive Ingredient Method" will be assumed. Where "Multiple Ingredient Method" approach is used, PDTS will follow the NCPDP 5.1 implementation guide. At the time of certification, the TMOP will be required to declare intention of using the "Multiple Ingredient Method". The level of certification will indicate compound approach. Where "Multiple Ingredient Method" approach is indicated, additions certification materials will be provided.
- ***** To calculate the gross amount due, apply this formula:

Prescription Claim Request Formula:

$$\begin{aligned}
 &\text{Ingredient Cost Submitted (409-D9)} \\
 &+ \text{Dispensing Fee Submitted (412-DC)} \\
 &+ \text{Incentive Amount Submitted (438-E3)} \\
 &+ \text{Other Amount Claimed Submitted (480-H9)} \\
 &+ \text{Flat Sales Tax Amount Submitted (481-HA)} \\
 &+ \text{Percentage Sales Tax Amount Submitted (482-GE)} \\
 &\text{-----} \\
 &= \text{Gross Amount Due (430-DU)} \\
 &\quad - \text{Patient Paid Amount Submitted (433-DX)} \\
 &\quad - \text{Other Payer Amount Paid (431-DV)} \\
 &(\text{Result is Net Amount Due})
 \end{aligned}$$

***** To indicate that a Prior Authorization has been determined for medical necessity, enter “1” in Prior Authorization Type Code (461-EU0). Enter the end date of the Prior Authorization (CCYYMMDD-Format) in Prior Authorization Number Submitted (462-EV) and enter “7” in Submission Clarification Code 42Ø -DK).

2. PARTIAL FILLS

- The 5.1 version of PDTS will support partial fills. Additional detail relation to partial fill submissions and response will be provided in a subsequent release of the ICD. Certification requirements will include partial fill transactions. (A separate section follows that illustrates a partial fill transaction).

3. DISPENSING FACILITIES/PHARMACIES

- For the TMOP pharmacies, the NCPDP ID of the pharmacy from which the prescription is mailed is to be sent on the transactions.

4. PRESCRIBERS/ PHYSICIAN PROVIDERS

- The value that will be used to identify prescribers/providers will be DEA numbers. A valid DEA # is required on all transactions. Controlled substance prescriptions will be edited against a file of all valid DEA numbers. If the DEA sent on a controlled substance prescription is invalid or expired, the claim will be rejected for a Non Matched Prescriber ID (NCPDP reject code 56). For all non-controlled substance prescriptions, we will edit for a valid format of the DEA number. If the DEA is not valid, the prescription will reject for a Missing/Invalid Prescriber ID (NCPDP reject code 25).

5. COMPOUNDS

- PDTS will accommodate compounds submitted with multiple ingredients following the NCPDP standard. A separate transaction section follows that will illustrate a multiple compound transaction.

IX. TRANSACTIONS RESPONSE

- Transactions processed by WebMD will be responded to electronically in NCPDP version 5.1 format.
- Provider/Pharmacy computer systems that are interfaced directly with WebMD 's host computer must be certified prior to receiving NCPDP response transactions.
- TMOP dispensings where the only ProDUR conflicts are with non-TMOP dispensings will result in a claim response containing NCPDP conflict code and appropriate NCPDP advisory messaging. The determination of whether these messages are on an accepted or rejected response will be determined by the DoD direction as outlined in the "Point of Care Edits" section.
- TMOP dispensings where the only ProDUR conflicts are with other TMOP dispensings will result in a reject or advisory going back to the TMOP.
- TMOP dispensings that do not satisfy PDTs data requirements will result in a rejected claim response with the corresponding NCPDP reject code.
- Accepted/Rejected responses will be according to NCPDP formats as indicated in Sections 1.
- PDTs responses will indicate prices calculated according to submitted pricing.
- Transactions that fail DEERS eligibility check will be rejected with the appropriate NCPDP reject code.
- Transactions where patient has primary coverage through another carrier will be rejected unless overridden as indicated in Section VII. Databases.
- Transactions for patients who have not satisfied deductibles, or who have exceeded their catastrophic cap limit will return adjusted copay.
- The PDTs Transaction Response Format is as follows:

1. BILLING ACCEPTED RESPONSE - PAID

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 - Rx Billing	
109-A9	Transaction Count	1	A/N	1- One Occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS>AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	Up to 200 Bytes	DEERS New Patient ID returned here on all paid, duplicate of paid or accepted transactions.

-- Transaction Continued --

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111- AM	Segment Identification	2	A/N	21 – Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	P – Paid	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	

-- Transaction Continued --

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 – Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	
FS	Field Separator	3		<FS> 9F	
551-9F	Preferred Product Count	1	N	1 - Preferred product identified	
FS	Field Separator	3		<FS> AP	
552-AP	Preferred Product ID Qualifier	2	A/N	03 – NDC	
FS	Field Separator	3		<FS> AR	
553-AR	Preferred Product ID	19	A/N	NDC Code	

-- Transaction Continued --

Response Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	23 - Response Pricing Segment	
FS	Field Separator	3		<FS> F5	
505-F5	Patient Pay Amount	8	D	Format = S 9(6)v99	
FS	Field Separator			<FS> F6	
506-F6	Ingredient Cost Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F7	
507-F7	Dispensing Fee Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> AV	
557-AV	Tax Exempt Indicator	1	A/N	1 - Tax exempt 2- Not Tax Exempt	
FS	Field Separator	3		<FS> F9	
509-F9	Total Amount Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> FN	
523-FN	Amount Attributed to Sales Tax	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> FI	
518-FI	Amount of Copay/Coinsurance	8	D	Format = S 9(6)v99	

-- End --

2. TRANSACTION ACCEPTED RESPONSE WITH APPROVED MESSAGE CODE

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 -Rx Billing	
109-A9	Transaction Count	1	A/N	1 - One occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	Up to 200 Bytes	DEERS New Patient ID returned here on all paid, duplicate of paid or accepted transactions.

-- Transaction Continued --

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	P – Paid	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	
FS	Field Separator	3		<FS> 5F	
547-5F	Approved Message Code Count	1	N	1	
FS	Field Separator	3		<FS> 6F	
548-6F	Approved Message Code	3	A/N	001 - Generic Available 002 – Non Formulary Drug 003 – Maintenance Drug	

-- Transaction Continued --

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 – Response Claim Segment	
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	

--Transaction Continued --

Response Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	3		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	23 - Response Pricing Segment	
FS	Field Separator	3		<FS> F5	
505-F5	Patient Pay Amount	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F6	
506-F6	Ingredient Cost Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F7	
507-F7	Dispensing Fee Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> AV	
557-AV	Tax Exempt Indicator	1	A/N	1 - Tax exempt 2- Not Tax Exempt	
FS	Field Separator	3		<FS> F9	
565-J4	Other Amount Paid	8	D	Format = S 9(6) v99	
FS	Field Separator	3			
509-F9	Total Amount Paid	8	D	Format = S 9(6) v99	
FS	Field Separator	3		<FS> FM	
522-FM	Basis of Reimbursement Determination	2	N	Ø1 - Ingredient cost paid as submitted	

-- End--

3. TRANSACTION ACCEPTED DUPLICATE RESPONSE

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 - Rx Billing	
109-A9	Transaction Count	1	A/N	1 - One occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	Up to 200 Bytes	DEERS New Patient ID returned here on all paid, duplicate of paid or accepted transactions.

-- Transaction Continued --

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	D – Duplicate of Paid	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	

-- Transaction Continued --

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 – Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	
FS	Field Separator	3		<FS> 9F	
551-9F	Preferred Product Count		N	1 - Preferred product identified	
FS	Field Separator	3		<FS> AP	
552-AP	Preferred Product ID Qualifier	2	A/N	03 – NDC	
FS	Field Separator	3		<FS> AR	
553-AR	Preferred Product ID	19	A/N	NDC Code	

--Transaction Continued--

Response Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	3		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	23 - Response Pricing Segment	
FS	Field Separator	3		<FS> F5	
505-F5	Patient Pay Amount	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F6	
506-F6	Ingredient Cost Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F7	
507-F7	Dispensing Fee Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> AV	
557-AV	Tax Exempt Indicator	1	A/N	1 - Tax exempt 2- Not Tax Exempt	
FS	Field Separator	3		<FS> F9	
565-J4	Other Amount Paid	8	D	Format = S 9(6) v99	
FS	Field Separator	3			
509-F9	Total Amount Paid	8	D	Format = S 9(6) v99	
FS	Field Separator	3		<FS> FM	
522-FM	Basis of Reimbursement Determination	2	N	Ø1 - Ingredient cost paid as submitted	

-- End --

4. TRANSACTION ACCEPTED WITH DUR ALERT

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 - Rx Billing	
109-A9	Transaction Count	1	A/N	1 - One occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

--End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	Up to 200 Bytes	DEERS New Patient ID returned here on all paid, duplicate of paid or accepted transactions.

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	P - Paid	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	

--Transaction Continued--

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 - Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	
FS	Field Separator	3		<FS> 9F	
551-9F	Preferred Product Count		N	1 - Preferred product identified	
FS	Field Separator	3		<FS> AP	
552-AP	Preferred Product ID Qualifier	2	A/N	03 - NDC	
FS	Field Separator	3		<FS> AR	
553-AR	Preferred Product ID	19	A/N	NDC Code	

--Transaction Continued--

Response Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	23 - Response Pricing Segment	
FS	Field Separator	3		<FS> F5	
505-F5	Patient Pay Amount	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F6	
506-F6	Ingredient Cost Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F7	
507-F7	Dispensing Fee Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> AV	
557-AV	Tax Exempt Indicator	1	A/N	1=Tax Exempt 2=Not Tax Exempt	
FS	Field Separator	3		<FS> J4	
565-J4	Other Amount Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F9	
509-F9	Total Amount Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> FM	
522-FM	Basis of Reimbursement Determination	2	N	01 - Ingredient cost paid as submitted	
FS	Field Separator	3		<FS> FN	
523-FN	Amount Attributed to Sales Tax	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> FI	
518-FI	Amount of Copay/Coinsurance	8	D	Format = S 9(6)v99	

--Transaction Continued--

Response DUR/PPS Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	24 – Response DUR/PPS Segment	
FS	Field Separator	3		<FS> 7E	
567-J6	DUR/PPS Response Code Counter	1	N	1	
FS	Field Separator	3		<FS> E4	
439-E4	Reason For Service Code	2	A/N		
FS	Field Separator	3		<FS> FS	
528-FS	Clinical Significance Code	1	A/N		
FS	Field Separator	3		<FS> FT	
529-FT	Other Pharmacy Indicator	1	N		
FS	Field Separator	3		<FS> FU	
530-FU	Previous Date of Fill	8	N	CCYYMMDD	
FS	Field Separator	3		<FS> 531 - FV	
531-FV	Quantity of Previous Fill	10	N	Format = 9(7)v999	
FS	Field Separator	3		<FS> FW	
532-FW	Database Indicator	1	N		
FS	Field Separator	3		<FS> FX	
533-FX	Other Prescriber Indicator	1	N		
FS	Field Separator	3		<FS> FY	
544-FY	DUR Free Text Message	30	A/N		

--End --

5. TRANSACTION REJECTED REPSONSE (Header Reject)

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 - Rx Billing	
109-A9	Transaction Count	1	A/N	1 - One Occurrence	
501-F1	Header Response Status	1	A/N	R - Rejected	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	2		<FS> AM	
111-AM	Segment Identification	2	A/N	21 – Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	UP TO 200 BYTES	

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	R - Rejected	
FS	Field Separator	3		<FS>F3	
503 – F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FA	
510-FA	Reject Count	2	N	1 - # Reject Codes that follow	
FS	Field Separator	3		<FS> FB	
511-FB	Reject Code	3	A/N	01 - M/I BIN Number	
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	
FS	Field Separator	3		<FS> 7F	
549-7F	Help Desk Phone Number Qualifier	2	A/N	03 - Processor/PBM	
FS	Field Separator	3		<FS> 8F	
550-8F	Help Desk Phone Number	18	A/N		

--End--

6. TRANSACTION REJECTED RESPONSE

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 - Rx Billing	
109-A9	Transaction Count	1	A/N	1 - One Occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	2		<FS> AM	
111-AM	Segment Identification	2	A/N	21 – Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	UP TO 200 BYTES	

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	2		<FS> AM	
111-AM	Segment Identification	2	A/N	21 – Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	R – Rejected	
FS	Field Separator	3		<FS>F3	
503 – F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FA	
510-FA	Reject Count	2	N	1 - # Reject Code follows	
FS	Field Separator	3		<FS> FB	
511-FB	Reject Code	3	A/N	70 - Product/Service not covered	
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	UP TO 200 BYTES	
FS	Field Separator	3		<FS> 7F	
549-7F	Help Desk Phone Number Qualifier	2	A/N	03 – Processor/PBM	
FS	Field Separator	3		<FS> 8F	
550-8F	Help Desk Phone Number	18	A/N	800-777-HELP	

--Transaction Continued--

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 - Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS> 9F	
551-9F	Preferred Product Count	1	N	1 - One preferred product identified	
FS	Field Separator	3		<FS> AP	
552-AP	Preferred Product ID Qualifier	2	A/N	Ø3 – NDC	
FS	Field Separator	3		<FS> AR	
553-AR	Preferred Product ID	19	A/N	NDC Code	
FS	Field Separator	3		<FS> AS	
554-AS	Preferred Product Incentive	8	D	S 9(6)v99	

--End --

NOTE: The Drug-to-Drug Interaction “Conflict Code” contained in the DUR Response Data outlined in Exhibit A is based on First Data Bank’s DDIM release 3.2.

X. TRANSACTION MULTI-INGREDIENT COMPOUND PRESCRIPTION

- Transactions processed by WebMD will be submitted electronically, in NCPDP version 5.1 format.
- Provider/Pharmacy computer systems that are interfaced directly with WebMD 's host computer must be certified prior to submitting live Transactions.
- The PDTS Transaction Submission Format is as follows:

1. Multi-Ingredient Compound Prescription Billing

Field	Name	Size	Type	Value	Edits/ Requirements
101-A1	BIN Number	6	N	600426	Required
102-A2	Version/Release Number	2	A/N	51	Required
103-A3	Transaction Code	2	A/N	B1 = Billing B3 = Rebill	Required
104-A4	Processor Control Number	10	A/N	DDbWebMD assigned number b=space	Required
109-A9	Transaction Count	1	A/N	1 – One Occurrence Only valid value is “1”. Multiple transactions not supported by NCPDP Standard	Required
202-B2	Service Provider ID Qualifier	2	N	07 - NCPDP Provider ID	Exact Match Required
201-B1	Service Provider ID	15	A/N	NCPDP ID	Valid NCPDP Format
401-D1	Date of Service	8	N	CCYYMMDD	Required
110-AK	Software Vendor/Certification ID	10	A/N	Spaces	Required

-- End of Fixed Section --

Patient Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	01 – Patient Segment	Required
FS	Field Separator	3		<FS> C4	
304-C4	Date of Birth	8	N		Required, must include month, day and year
FS	Field Separator	3		<FS> C5	
305-C5	Patient Gender Code	1	N		Required
FS	Field Separator	3		<FS> CA	
310-CA	Patient First Name	12	A/N		Required
FS	Field Separator	3		<FS> CB	
311-CB	Patient Last Name	15	A/N		Required
FS	Field Separator	3		<FS>CP	
325-CP	Patient Zip	15	A/N		Required

--Transaction Continued--

Insurance Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	04 – Insurance Segment	Required
FS	Field Separator	3		<FS>C2	
302-C2	Cardholder ID	20	A/N		Required
FS	Field Separator	3		<FS>CC	Required
312-CC	Cardholder First Name	12	A/N	Sponsor first name	Required
FS	Field Separator	3		<FS>CD	Required
313-CD	Cardholder Last Name	15	A/N	Sponsor last name	Required
FS	Field Separator	3		<FS>C9	Required
3 09-C9	Eligibility Clarification Code	1	N	2 = Override	Required, to override DEERS Eligibility status of “ Not Eligible”
FS	Field Separator	3		<FS>C1	

Field	Name	Size	Type	Value	Edits/ Requirements
301-C1	Group ID	15	A/N		Capture of submitted value not edited
FS	Field Separator	3		<FS>C3	
303-C3	Person Code	3	A/N	FSN	Required
FS	Field Separator	3		<FS> C6	
306-C6	Patient Relationship Code	1	N	NCPDP Value	Required

—Transaction Continued—

Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	07 – Claim Segment	Required
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	Required
FS	Field Separator	3		<FS>D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	Required
FS	Field Separator	3		<FS>E1	
436-E1	Product / Service ID Qualifier	2	A/N	03 - NDC	
FS	Field Separator	3		<FS>D7	
407-D7	Product/ Service ID	19	A/N	NDC Code	Valid NDC
FS	Field Separator	3		<FS>E7	
442-E7	Quantity Dispensed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> D3	
403-D3	Fill Number	2	N		Required
FS	Field Separator	3		<FS> D5	
405-D5	Days Supply	3	N		Required
FS	Field Separator	3		<FS> D6	
406-D6	Compound Code	1	N	2-Compound	Required, non-blank
FS	Field Separator	3		<FS> D8	
408-D8	Dispense As Written (DAW)/Product Selection Code	1	N	NCPDP Value	Required
FS	Field Separator	3		<FS> DE	
414-DE	Date Prescription Written	8	N	CCYYMMDD	Required
FS	Field Separator	3		<FS> DF	
415-DF	Number of Refills Authorized	2	N		Required
FS	Field Separator	3		<FS> DK	
420 -DK	Submission Clarification Code	2	N	7 = Medically Necessary	Required if applicable
FS	Field Separator	3		<FS> C8	
308-C8	Other Coverage Code	2	N	1 = No Other Coverage	Identified to override OHI flag on PDTS.
FS	Field Separator	3		<FS> EU	
461-EU	Prior Authorization Type Code	2	N	1- Prior Authorization	
FS	Field Separator	3		<FS> EV	
462-EV	Prior Authorization Number Submitted	11	N		Required when prior authorization number is applicable to the transaction*****

—Transaction Continued—

Prescriber Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	03 – Prescriber Segment	Required

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS> EZ	
466-EZ	Prescriber ID Qualifier	2	A/N	12 - DEA	Required
FS	Field Separator	3		<FS> DB	
411-DB	Prescriber ID	15	A/N	DEA	Required, Valid DEA #
FS	Field Separator	3		<FS> DR	
427-DR	Prescriber Last Name	15	A/N		Required

--Transaction Continued--

DUR/PPS Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø8 - DUR/PPS Segment	Required
FS	Field Separator	3		<FS>7E	
473-7E	DUR/PPS Code Counter	1	N	1	
FS	Field Separator	3		<FS>E4	
439-E4	Reason for Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS>E5	
44Ø E5	Professional Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS>E6	
441-E6	Result of Service Code	2	A/N		Captured, used to validate provider/pharmacy override

--Transaction Continued--

Compound Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	10 – Compound Segment	Required
FS	Field Separator	3		<FS>EF	
45Ø-EF	Compound Dosage Form Description Code	2	A/N	11 - Solution	
FS	Field Separator	3		<FS> EG	
451-EG	Compound Dispensing Unit Form	1	N	3 - Milliliters	
FS	Field Separator	3		<FS> EH	
452-EH	Compound Route of Administration	2	N	11 – Oral	
FS	Field Separator	3		<FS>EC	
447-EC	Compound Ingredient Component Count	2	N	03 – Three ingredients	
FS	Field Separator	3		<FS>RE	
488-RE	Compound Product ID Qualifier	2	A/N	03 – NDC	
FS	Field Separator	3		<FS>TE	
489-TE	Compound Product ID	19	A/N	1184501390	
FS	Field Separator	3		<FS>ED	
448-ED	Compound Ingredient Quantity	1Ø	N	120000 Format = 9(7) v999	
FS	Field Separator	3		<FS> EE	
449-EE	Compound Ingredient Drug Cost	8	D	12 {= \$1.20	
FS	Field Separator	3		<FS> UE	
49Ø-UE	Compound Ingredient Basis of Cost Determination	2	A/N	01 – AWP	
FS	Field Separator	3		<FS>RE	
488-RE	Compound Product ID Qualifier	2	A/N	03- NDC	
FS	Field Separator	3		<FS>TE	
489-TE	Compound Product ID	19	A/N	00603148049	
FS	Field Separator	3		<FS>ED	

Field	Name	Size	Type	Value	Edits/ Requirements
448-ED	Compound Ingredient Quantity	10	N	120000 Format = 9(7) v999	
FS	Field Separator	3		<FS> EE	
449-EE	Compound Ingredient Drug Cost	8	D	84{ = \$8.40	
FS	Field Separator	3		<FS> UE	
490-UE	Compound Ingredient Basis of Cost Determination	2	A/N	01- AWP	
FS	Field Separator	3		<FS>RE	
488-RE	Compound Product ID Qualifier	2	A/N	03- NDC	
FS	Field Separator	3		<FS>TE	
489-TE	Compound Product ID	19	A/N	60809031055	
FS	Field Separator	3		<FS>ED	
448-ED	Compound Ingredient Quantity	10	N	120000 Format = 9(7) v999	
FS	Field Separator	3		<FS> EE	
449-EE	Compound Ingredient Drug Cost	8	D	46{ - \$4.60	
FS	Field Separator	3		<FS> UE	
490-UE	Compound Ingredient Basis of Cost Determination	2	A/N	02- Local Wholesaler	

--Transaction Continued--

Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	11 – Pricing Segment	Required
FS	Field Separator	3		<FS>D9	
409-D9	Ingredient Cost Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS> DC	
412-DC	Dispensing Fee Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS> DX	
433-DX	Patient Paid Amount Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS>HA	
481-HA	Flat Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>GE	
482-GE	Percentage Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>HE	
483-HE	Percentage Sales Tax Rate Submitted	7	D	Format = S 9(3)v9999	Required, if applicable
FS	Field Separator	3		<FS>JE	
484-JE	Percentage Sales Tax Basis Submitted	2	A/N		Required, if applicable
FS	Field Separator	3		<FS> DQ	
426-DQ	Usual and Customary Charge	8	D	Format = S 9(6)v99	Optional
FS	Field Separator	3		<FS> DU	
460-DU	Gross Amount Due*****	8	D	Format = S 9(6)v99	Required

-Transaction Continued -

Clinical Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	13 - Clinical Segment	Required
FS	Field Separator	3		<FS> VE	
491-VE	Diagnosis Code Count	1	N	1	Optional
FS	Field Separator	3		<FS>WE	
492- WE	Diagnosis Code Qualifier	2	A/N	01 – ICD9	Optional
FS	Field Separator	3		<FS>DO	
424-DO	Diagnosis Code	15	A/N		Optional

--End--

XI. TRANSACTION MULTI- INGREDIENT COMPOUND RESPONSE

- Transactions processed by WebMD will be responded to electronically in NCPDP version 5.1 format.
- Provider/Pharmacy computer systems that are interfaced directly with WebMD 's host computer must be certified prior to receiving NCPDP response transactions.

The PDTs Transaction Response Format is as follows:

1. Multi-Ingredient Compound Accepted Response

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 - Rx Billing	
109-A9	Transaction Count	1	A/N	1- One Occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

--End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS>AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	Up to 200 Bytes	DEERS New Patient ID returned here on all paid, duplicate of paid or accepted transactions.

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111- AM	Segment Identification	2	A/N	21 – Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	P – Paid	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	

--Transaction Continued--

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 – Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	
FS	Field Separator	3		<FS> 9F	
551-9F	Preferred Product Count	1	N	1 - Preferred product identified	
FS	Field Separator	3		<FS> AP	
552-AP	Preferred Product ID Qualifier	2	A/N	03 – NDC	

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS> AR	
553-AR	Preferred Product ID	19	A/N	NDC Code	

--Transaction Continued--

Response Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	23 - Response Pricing Segment	
FS	Field Separator	3		<FS> F5	
505-F5	Patient Pay Amount	8	D	Format = S 9(6)v99	
FS	Field Separator			<FS> F6	
506-F6	Ingredient Cost Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> F7	
507-F7	Dispensing Fee Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> AV	
557-AV	Tax Exempt Indicator	1	A/N	1 - Tax exempt 2-Not Tax Exempt	
FS	Field Separator	3		<FS> F9	
509-F9	Total Amount Paid	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> FN	
523-FN	Amount Attributed to Sales Tax	8	D	Format = S 9(6)v99	
FS	Field Separator	3		<FS> FI	
518-FI	Amount of Copay/Coinsurance	8	D	Format = S 9(6)v99	

-- End --

2. Multi-Ingredient Compound Rejected Response

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B1 - Rx Billing	
109-A9	Transaction Count	1	A/N	1 - One Occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

--End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	UP TO 200 BYTES	

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	2		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	R - Rejected	
FS	Field Separator	3		<FS>F3	

Field	Name	Size	Type	Value	Edits/ Requirements
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FA	
510-FA	Reject Count	2	N	1 - # Reject Code follows	
FS	Field Separator	3		<FS> FB	
511-FB	Reject Code	3	A/N	70 - Product/Service not covered	
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	UP TO 200 BYTES	
FS	Field Separator	3		<FS> 7F	
549-7F	Help Desk Phone Number Qualifier	2	A/N	03 - Processor/PBM	
FS	Field Separator	3		<FS> 8F	
550-8F	Help Desk Phone Number	18	A/N	800 777 HELP	

--Transaction Continued--

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 - Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	
FS	Field Separator	3		<FS> 9F	
551-9F	Preferred Product Count	1	N	1 - One preferred product identified	
FS	Field Separator	3		<FS> AP	
552-AP	Preferred Product ID Qualifier	2	A/N	03 - NDC	
FS	Field Separator	3		<FS> FS	
553-AR	Preferred Product ID	19	A/N	NDC Code	
FS	Field Separator	3		<FS> AS	
554-AS	Preferred Product Incentive	8	D	Format=S 9(6)v99	

-- End --

XII. REVERSAL TRANSACTION SUBMISSION

- Transaction reversals will be submitted electronically in the NCPDP version 5.1 format.
- Provider/Pharmacy computer systems that are interfaced directly with WebMD 's host computer must be certified.
- PDTS supports transactions containing up to 4 reversals
- PDTS will return accepted response for duplicated reversal transactions, with duplicate indicator set.
- The PDTS Transaction Submission Format is as follows:

1. REVERSAL TRANSMISSION

Field	Name	Size	Type	Value	Edits/ Requirements
101-A1	BIN Number	6	N	600426	Required
102-A2	Version/Release Number	2	A/N	51	Required
103-A3	Transaction Code	2	A/N	B2 - Reversal	Required
104-A4	Processor Control Number	10	A/N	DDb WebMD Assigned Number b=space	Required
109-A9	Transaction Count	1	A/N	1 - One Occurrence 2 – Two Occurrences 3 – Three Occurrences 4 – Four Occurrences	Required
202-B2	Service Provider ID Qualifier	2	N	07 – NCPDP Provider ID	Required
201-B1	Service Provider ID	15	A/N	NCPDP ID	Required
401-D1	Date of Service	8	N	CCYYMMDD	Required
110-AK	Software Vendor/Certification ID	10	A/N		Spaces

-- End of Fixed Section --

CLAIM SEGMENT

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	Required
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	07 – Claim Segment	Required
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	Required
FS	Field Separator	3		<FS> D2	
402-D2	Rx/Service Reference Number	7	A/N	Prescription Number	Required
FS	Field Separator	3		<FS> E1	
436-E1	Product/Service ID Qualifier	2	N	03= NDC	Required
FS	Field Separator	3		<FS> D7	
407-D7	Product /Service ID	19	A/N	NDC Code	Required
FS	Field Separator	3		<FS> D3	
403-D3	Fill Number	2	N		Required, even for value “00” – New Rx

--Transaction Continued--

DUR/PPS SEGMENT

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	08 - DUR/PPS Segment	Required
FS	Field Separator	3		<FS> 7E	
473-7E	DUR/PPS Code Counter	1	N	1	Required
FS	Field Separator	3		<FS> E4	
439-E4	Reason for Service Code	2	A/N		Optional
FS	Field Separator	3		<FS> E5	

Field	Name	Size	Type	Value	Edits/ Requirements
440-E5	Professional Service Code	2	A/N		Optional
FS	Field Separator	3		<FS> E6	
441-E6	Result of Service Code	2	A/N		Optional
FS	Field Separator	3		<FS> 8E	
474-8E	DUR/PPS Level of Effort	2	N		Optional

-- End of Reversal --

****NOTE:** Warning messages on PDTS ProDUR conflicts generate accepted claim responses. It is necessary for dispensing to be reversed with appropriate indicators in fields 439-E4, 440-E5 and 441-E6, if the PDTS messages result in the prescription not being filled.

XIII. TRANSACTION REVERSAL RESPONSES

- Reversed transactions processed by WebMD will be responded to electronically in the NCPDP version 5.1 format.
- Provider/Pharmacy computer systems that are interfaced directly with WebMD 's host computer must be certified prior to receiving NCPDP response transactions.
- The PDTS Reversal Transaction Response Format is as follows:

1. REVERSAL ACCEPTED RESPONSE – APPROVED

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B2 - Reversal	
109-A9	Transaction Count	1	A/N	1 - One Occurrence 2 – Two Occurrences 3 – Three Occurrences 4 – Four Occurrences	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	UP TO 200 BYTES	

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	A = Accepted	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	

--Transaction Continued--

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 – Response Claim Segment	
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx/Service Reference Number	7	N	Prescription Number	

-- End--

2. REVERSAL ACCEPTED RESPONSE – DUPLICATE

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B2 – Reversal	
109-A9	Transaction Count	1	A/N	1 - One Occurrence 2 – Two Occurrences 3 – Three Occurrences 4 – Four Occurrences	
501-F1	Header Response Status	1	A/N	A – Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 – NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	UP TO 200 BYTES	

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	P – Paid	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	

--Transaction Continued--

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 – Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	
FS	Field Separator	3		<FS> D2	
402-D2	Rx/Service Reference Number	7	N	Prescription Number	

-- End --

3. REVERSAL REJECTED RESPONSE

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	B2 - Reversal	
109-A9	Transaction Count	1		1 - One Occurrence 2 - Two Occurrences 3 - Three Occurrences 4 - Four Occurrences	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	UP TO 200 BYTES	

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	R - Rejected	
FS	Field Separator	3		<FS> F3	
503-F3	Authorization Number	20	A/N		
FS	Field Separator	3		<FS> FA	
510-FA	Reject Count	2	N	1 # Reject Codes follows	
FS	Field Separator	3		<FS> FB	
511-FB	Reject Code	3	N	87 - Reversal not processed	
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	
FS	Field Separator	3		<FS> 7F	
549-7F	Help Desk Phone Number Qualifier	2	A/N	03 - Processor/PBM	
FS	Field Separator	3		<FS> 8F	
550-8F	Help Desk Phone Number	18	A/N		

--Transaction Continued--

Response Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	22 - Response Claim Segment	
FS	Field Separator	3		<FS> EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 - Rx Billing	

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS> D2	
402-D2	Rx/Service Reference Number	7	N	Prescription Number	

-- End --

IVX. TRANSACTION PARTIAL FILL SUBMISSION

- Transactions processed by WebMD will be submitted electronically, in NCPDP version 5.1 format.
- Provider/Pharmacy computer systems that are interfaced directly with WebMD 's host computer must be certified prior to submitting live Transactions.
- The PDTS Transaction Submission Format is as follows:

1. Partial Fill Initial Billing Submission

Field	Name	Size	Type	Value	Edits/ Requirements
101-A1	BIN Number	6	N	600426	Required
102-A2	Version/Release Number	2	A/N	51	Required
103-A3	Transaction Code	2	A/N	B1 – Billing	Required
104-A4	Processor Control Number	10	A/N	DDb WebMD assigned number b=space	Required
109-A9	Transaction Count	1	A/N	1 – One Occurrence 2 – Two Occurrences 3 – Three Occurrences 4 – Four Occurrences	Required
202-B2	Service Provider ID Qualifier	2	N	07 - NCPDP Provider ID	Required, exact match required
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	Required
110-AK	Software Vendor/Certification ID	10	A/N	Spaces	Required

-- End of Fixed Section --

Patient Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	01 – Patient Segment	Required
FS	Field Separator	3		<FS> C4	
304-C4	Date of Birth	8	N		Required, must include month, day & year
FS	Field Separator	3		<FS> C5	
305-C5	Patient Gender Code	1	N	NCPDP Value	Required
FS	Field Separator	3		<FS> CA	
310-CA	Patient First Name	12	A/N		Required
FS	Field Separator	3		<FS> CB	
311-CB	Patient Last Name	15	A/N		Required
FS	Field Separator	3		<FS>CP	
325-CP	Patient Zip	15	A/N		Required

-- Transaction Continued --

Insurance Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	04 – Insurance Segment	Required
FS	Field Separator	3		<FS>C2	
302-C2	Cardholder ID	20	A/N		Required
FS	Field Separator	3		<FS>CC	Required
312-CC	Cardholder First Name	12	A/N	Sponsor first name	Required
FS	Field Separator	3		<FS>CD	Required
313-CD	Cardholder Last Name	15	A/N	Sponsor last name	Required
FS	Field Separator	3		<FS>C9	Required
309-C9	Eligibility Clarification Code	1	N	2 = Override	Required, to override DEERS Eligibility status of “Not Eligible”
FS	Field Separator	3		<FS>C1	
301-C1	Group ID	15	A/N	Branch of Military Code	Capture of submitted value not edited

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS>C3	
303-C3	Person Code	3	A/N	999	Required
FS	Field Separator	3		<FS>C6	
306-C6	Patient Relationship Code	1	N	NCPDP Value	Required

--Transaction Continued --

Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	07 – Claim Segment	Required
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	Required
FS	Field Separator	3		<FS>D2	
402-D2	Rx Number/Service Reference Number	7	N	Prescription Number	Required
FS	Field Separator	3		<FS>E1	
436-E1	Product / Service ID Qualifier	2	A/N	03 - NDC	
FS	Field Separator	3		<FS>D7	
407-D7	Product/ Service ID	19	A/N	NDC Code	Required, Valid NDC
FS	Field Separator	3		<FS>E7	
442-E7	Quantity Dispensed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> D3	
403-D3	Fill Number	2	N		Required, even for value “00” – New Rx
FS	Field Separator	3		<FS> D5	
405-D5	Days Supply	3	N		Required
FS	Field Separator	3		<FS> D6	
406-D6	Compound Code	1	N	1-Not a Compound 2-Compound	Required, non-blank
FS	Field Separator	3		<FS> D8	
408-D8	Dispense As Written (DAW)/Product Selection Code	1	N	NCPDP Value	Required
FS	Field Separator	3		<FS> DE	
414-DE	Date Prescription Written	8	N	CCYYMMDD	Required
FS	Field Separator	3		<FS> DF	
415-DF	Number of Refills Authorized	2	N		Required
FS	Field Separator	3		<FS> DK	
420 -DK	Submission Clarification Code	2	N	7 = Medically Necessary	Required if applicable
FS	Field Separator	3		<FS> ET	
460- ET	Quantity Prescribed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> C8	
308-C8	Other Coverage Code	2	N	1 = No Other Coverage Required to Override OHI Flag on PDTS	
FS	Field Separator	3		<FS> EU	
461-EU	Prior Authorization Type Code	2	N	1 = Prior Authorization	
FS	Field Separator	3		<FS> EV	
462-EV	Prior Authorization Number Submitted	11	N		Required when prior authorization number is applicable to the transaction*****
FS	Field Separator	3		<FS> HD	
343-HD	Dispensing Status	1	A/N	P = Partial Fill	Required
FS	Field Separator	3		<FS> HF	
344-HF	Quantity Intended To Be Dispensed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> HG	

Field	Name	Size	Type	Value	Edits/ Requirements
345-HG	Days Supply Intended To Be Dispensed	3	N		Required

--Transaction Continued --

Prescriber Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø3 – Prescriber Segment	Required
FS	Field Separator	3		<FS> EZ	
466-EZ	Prescriber ID Qualifier	2	A/N	12 – DEA	Required
FS	Field Separator	3		<FS> DB	
411-DB	Prescriber ID	15	A/N	DEA	Required, Valid DEA
FS	Field Separator	3		<FS> DR	
427-DR	Prescriber Last Name	15	A/N		Required

--Transaction Continued --

DUR / PPS Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø8 - DUR/PPS Segment	Required
FS	Field Separator	3		<FS>7E	
473-7E	DUR/PPS Code Counter	1	N	1	Required
FS	Field Separator	3		<FS>E4	
439-E4	Reason for Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS>E5	
44Ø E5	Professional Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS>E6	
441-E6	Result of Service Code	2	A/N		Captured, used to validate provider/pharmacy override

--Transaction Continued --

Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	11 – Pricing Segment	Required
FS	Field Separator	3		<FS>D9	
4Ø9-D9	Ingredient Cost Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS> DC	
412-DC	Dispensing Fee Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS> DX	
433-DX	Patient Paid Amount Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS>HA	
481-HA	Flat Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>GE	
482-GE	Percentage Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>HE	
483-HE	Percentage Sales Tax Rate Submitted	7	A		Required, if applicable
FS	Field Separator	3		<FS>JE	
484-JE	Percentage Sales Tax Basis Submitted	2	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS> DQ	
426-DQ	Usual and Customary Charge	8	D	Format = S 9(6)v99	Optional
FS	Field Separator	3		<FS> DU	
46Ø-DU	Gross Amount Due	8	D	Format = S 9(6)v99	Required

--Transaction Continued--

Clinical Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	13 - Clinical Segment	Required
FS	Field Separator	3		<FS> VE	
491-VE	Diagnosis Code Count	1	N	1	Optional
FS	Field Separator	3		<FS>WE	
492-WE	Diagnosis Code Qualifier	2	A/N	Ø1- ICD 9	Optional
FS	Field Separator	3		<FS>DO	
424-DO	Diagnosis Code	15	A/N		Optional

--End--

2. Billing Partial Fill – Completion Billing Submission

Field	Name	Size	Type	Value	Edits/ Requirements
1Ø1-A1	BIN Number	6	N	6ØØ426	Required
1Ø2-A2	Version/Release Number	2	A/N	51	Required
1Ø3-A3	Transaction Code	2	A/N	B1 – Billing	Required
1Ø4-A4	Processor Control Number	1Ø	A/N	DDb WebMD assigned number b=space	Required
1Ø9-A9	Transaction Count	1	A/N	1 – One Occurrence 2 – Two Occurrences 3 – Three Occurrences 4 – Four Occurrences	Required
2Ø2-B2	Service Provider ID Qualifier	2	N	Ø7 - NCPDP Provider ID	Required, exact match required
2Ø1-B1	Service Provider ID	15	A/N	NCPDP ID	
4Ø1-D1	Date of Service	8	N	CCYYMMDD	Required
11Ø-AK	Software Vendor/Certification ID	1Ø	A/N	Spaces	Required

-- End of Fixed Section --

Patient Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø1 – Patient Segment	Required
FS	Field Separator	3		<FS> C4	
3Ø4-C4	Date of Birth	8	N		Required, must include month, day & year
FS	Field Separator	3		<FS> C5	
3Ø5-C5	Patient Gender Code	1	N	NCPDP Value	Required
FS	Field Separator	3		<FS> CA	
31Ø-CA	Patient First Name	12	A/N		Required
FS	Field Separator	3		<FS> CB	
311-CB	Patient Last Name	15	A/N		Required
FS	Field Separator	3		<FS>CP	
325-CP	Patient Zip	15	A/N		Required

-- Transaction Continued --

Insurance Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø4 – Insurance Segment	Required
FS	Field Separator	3		<FS>C2	
3Ø2-C2	Cardholder ID	2Ø	A/N		Required

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS>CD	Required
312-CC	Cardholder First Name	12	A/N	Sponsor first name	Required
FS	Field Separator	3		<FS>CD	Required
313-CD	Cardholder Last Name	15	A/N	Sponsor last name	Required
FS	Field Separator	3		<FS>C9	Required
3 09-C9	Eligibility Clarification Code	1	N	2 = Override	Required, to override DEERS Eligibility status of “ Not Eligible”
FS	Field Separator	3		<FS>C1	
301-C1	Group ID	15	A/N	Branch of Military Code	Capture of submitted value not edited
FS	Field Separator	3		<FS>C3	
303-C3	Person Code	3	A/N	999	Required
FS	Field Separator	3		<FS>C6	
306-C6	Patient Relationship Code	1	N	NCPDP Value	Required

--Transaction Continued --

Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	07 – Claim Segment	Required
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	Required
FS	Field Separator	3		<FS>D2	
402-D2	Rx Number/Service reference Number	7	N	Prescription Number	Required
FS	Field Separator	3		<FS>E1	
436-E1	Product / Service ID Qualifier	2	A/N	03 - NDC	Required
FS	Field Separator	3		<FS>D7	
407-D7	Product/ Service ID	19	A/N	NDC Code	Required, Valid NDC
FS	Field Separator	3		<FS> EN	
456-EN	Associated Rx/Service Reference Number	7	N		Required
FS	Field Separator	3		<FS> EP	
457-EP	Associated Rx/Service Date	8	N	CCYYMMDD	Required
FS	Field Separator	3		<FS>E7	
442-E7	Quantity Dispensed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> D3	
403-D3	Fill Number	2	N		Required, even for value “00” – New Rx
FS	Field Separator	3		<FS> D5	
405-D5	Days Supply	3	N		Required
FS	Field Separator	3		<FS> D6	
406-D6	Compound Code	1	N	1-Not a Compound 2-Compound	Required, non-blank
FS	Field Separator	3		<FS> D8	
408-D8	Dispense As Written (DAW)/Product Selection Code	1	N	NCPDP Value	Required
FS	Field Separator	3		<FS> DE	
414-DE	Date Prescription Written	8	N	CCYYMMDD	Required
FS	Field Separator	3		<FS> DF	
415-DF	Number of Refills Authorized	2	N		Required
FS	Field Separator	3		<FS> DK	
420 -DK	Submission Clarification Code	2	N	7 = Medically Necessary	Required if applicable
FS	Field Separator	3		<FS> ET	
460- ET	Quantity Prescribed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> C8	

Field	Name	Size	Type	Value	Edits/ Requirements
308-C8	Other Coverage Code	2	N	1 = No other coverage identified	Required to override OHI flag on PDTS
FS	Field Separator	3		<FS> EU	
461-EU	Prior Authorization Type Code	2	N	1 = Prior Authorization	Required when prior authorization number is applicable to the transaction*****
FS	Field Separator	3		<FS> EV	
462-EV	Prior Authorization Number Submitted	11	N		
FS	Field Separator	3		<FS> HD	
343-HD	Dispensing Status	1	N	C = Completion of Partial Fill	Required
FS	Field Separator	3		<FS> HF	
344-HF	Quantity Intended To Be Dispensed	10	N	Format = 9999999.999	Required, 3 position implied decimal
FS	Field Separator	3		<FS> HG	
345-HG	Days Supply Intended To Be Dispensed	3	N		Required

--Transaction Continued--

Prescriber Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS> AM	Required
111-AM	Segment Identification	2	A/N	03 – Prescriber Segment	Required
FS	Field Separator	3		<FS> EZ	
466-EZ	Prescriber ID Qualifier	2	A/N	12 – DEA	Required
FS	Field Separator	3		<FS> DB	
411-DB	Prescriber ID	15	A/N	DEA	Required, Valid DEA #
FS	Field Separator	3		<FS> DR	
427-DR	Prescriber Last Name	15	A/N		Required

-- Transaction Continued --

DUR/PPS Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS> AM	Required
111-AM	Segment Identification	2	A/N	08 - DUR/PPS Segment	Required
FS	Field Separator	3		<FS> 7E	
473-7E	DUR/PPS Code Counter	1	N	1	Required
FS	Field Separator	3		<FS> E4	
439-E4	Reason for Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS> E5	
440-E5	Professional Service Code	2	A/N		Captured, used to validate provider/pharmacy override
FS	Field Separator	3		<FS> E6	
441-E6	Result of Service Code	2	A/N		Captured, used to validate provider/pharmacy override

-- Transaction Continued --

Pricing Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS> AM	Required
111-AM	Segment Identification	2	A/N	11 – Pricing Segment	Required
FS	Field Separator	3		<FS> D9	
409-D9	Ingredient Cost Submitted	8	D	Format = S 9(6)v99	Required

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS> DC	
412-DC	Dispensing Fee Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS> DX	
433-DX	Patient Paid Amount Submitted	8	D	Format = S 9(6)v99	Required
FS	Field Separator	3		<FS>HA	
481-HA	Flat Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>GE	
482-GE	Percentage Sales Tax Amount Submitted	8	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS>HE	
483-HE	Percentage Sales Tax Rate Submitted	7	A		Required, if applicable
FS	Field Separator	3		<FS>JE	
484-JE	Percentage Sales Tax Basis Submitted	2	D	Format = S 9(6)v99	Required, if applicable
FS	Field Separator	3		<FS> DQ	
426-DQ	Usual and Customary Charge	8	D	Format = S 9(6)v99	Optional
FS	Field Separator	3		<FS> DU	
46Ø-DU	Gross Amount Due	8	D	Format = S 9(6)v99	Required

--Transaction Continued--

Clinical Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	13 - Clinical Segment	Required
FS	Field Separator	3		<FS> VE	
491-VE	Diagnosis Code Count	1	N	1	Optional
FS	Field Separator	3		<FS>WE	
492- WE	Diagnosis Code Qualifier	2	A/N	Ø1 – ICD9	Optional
FS	Field Separator	3		<FS>DO	
424-DO	Diagnosis Code	15	A/N		Optional

--End--

3. Reversal Partial Fill Transaction

Field	Name	Size	Type	Value	Edits/ Requirements
1Ø1-A1	BIN Number	6	N	6ØØ426	Required
1Ø2-A2	Version/Release Number	2	A/N	51	Required
1Ø3-A3	Transaction Code	2	A/N	B2 - Reversal	Required
1Ø4-A4	Processor Control Number	1Ø	A/N	DDb WebMD assigned number	Required
1Ø9-A9	Transaction Count	1	A/N	1 - One Occurrence 2 – Two Occurrences 3 – Three Occurrences 4 – Four Occurrences	Required
2Ø2-B2	Service Provider ID Qualifier	2	N	Ø7 – NCPDP Provider ID	Required
2Ø1-B1	Service Provider ID	15	A/N	NCPDP ID	Required
4Ø1-D1	Date of Service	8	N	CCYYMMDD	Required
11Ø-AK	Software Vendor/Certification ID	1Ø	A/N		Spaces

-- End of Fixed Section --

Claim Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	Required
SS	Segment Separator	1		<SS>	Required

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	Ø7 – Claim Segment	Required
FS	Field Separator	3		<FS>EM	
455-EM	Rx/Service Reference Number Qualifier	1	A/N	1 – Rx Billing	Required
FS	Field Separator	3		<FS> D2	
4Ø2-D2	Rx/Service Reference Number	7	A/N	Prescription Number	Required
FS	Field Separator	3		<FS> E1	
436-E1	Product/Service ID Qualifier	2	N	Ø3= NDC	Required
FS	Field Separator	3		<FS> D7	
4Ø7-D7	Product /Service ID	19	N	NDC Code	Required, Valid NDC
FS	Field Separator	3		<FS> D3	
4Ø3-D3	Fill Number	2	N		Required, even for value “ØØ” – New Rx
FS	Field Separator	3		<FS> HD	
343-HD	Dispensing Status	1	A/N	P = Partial Fill C = Completion of Partial Fill	Required

--Transaction Continued--

DUR/PPS Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	Ø8 - DUR/PPS Segment	Required
FS	Field Separator	3		<FS> 7E	
473-7E	DUR/PPS Code Counter	1	N	1	Required
FS	Field Separator	3		<FS> E4	
439-E4	Reason for Service Code	2	A/N		Optional
FS	Field Separator	3		<FS> E5	
44Ø-E5	Professional Service Code	2	A/N		Optional
FS	Field Separator	3		<FS> E6	
441-E6	Result of Service Code	2	A/N		Optional
FS	Field Separator	3		<FS> 8E	
474-8E	DUR/PPS Level of Effort	2	N		Optional

-- End --

Reversal Transactions for Partial Fill Submissions

If both “P” Partial and “C” Completion transactions have been accepted by the processor, **always** reverse the “C” Completion transaction **before** reversing the “P” Partial transaction.

XV. Eligibility Transaction

1. ELIGIBILITY TRANSACTION

Transaction Header Segment

This section is fixed. Every position of every field needs to be provided.

Field	Name	Size	Type	Value	Edits/ Requirements
101-A1	BIN Number	6	N	600426	Required
102-A2	Version/Release Number	2	A/N	51	Required
103-A3	Transaction Code	2	A/N	E1 – Eligibility	Required
104-A4	Processor Control Number	10	A/N	DDb WebMD assigned number b=space	Required
109-A9	Transaction Count	1	A/N	1 – One Occurrence	Required
202-B2	Service Provider ID Qualifier	2	N	07 - NCPDP Provider ID	Required, exact match required
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	Required
110-AK	Software Vendor/Certification ID	10	A/N	Spaces	Required

-- End of Fixed Section --

Patient Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	01 – Patient Segment	Required
FS	Field Separator	3		<FS> C4	
304-C4	Date of Birth	8	N		Required, must include month, day & year
FS	Field Separator	3		<FS> C5	
305-C5	Patient Gender Code	1	N		Required
FS	Field Separator	3		<FS> CA	
310-CA	Patient First Name	12	A/N		Required
FS	Field Separator	3		<FS> CB	
311-CB	Patient Last Name	15	A/N		Required

-- Transaction Continued --

Insurance Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	Required
FS	Field Separator	3		<FS>AM	Required
111-AM	Segment Identification	2	A/N	04 – Insurance Segment	Required
FS	Field Separator	3		<FS>C2	
302-C2	Cardholder ID	20	A/N		Required, enter the DEERS New Patient ID, or sponsor's SSN. Legacy ID's are not supported.
FS	Field Separator	3		<FS>CC	Required
312-CC	Cardholder First Name	12	A/N	Sponsor first name	Required
FS	Field Separator	3		<FS>CD	Required
313-CD	Cardholder Last Name	15	A/N	Sponsor last name	Required
FS	Field Separator	3		<FS>C6	
306-C6	Patient Relationship Code	1	N	NCPDP Value	Required

-End-

2. ELIGIBILITY ACCEPTED RESPONSE

Response Header Segment

This section is fixed. Every position of every field needs to be provided.

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	E1 - Eligibility	
109-A9	Transaction Count	1	A/N	1- One Occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
FS	Field Separator	3		<FS>AM	
111-AM	Segment Identification	2	A/N	20 - Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	200	A/N	Up to 200 Bytes	DEERS ID/Active/Non Active

-- Transaction Continued --

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	A - Accepted	

-- End--

3. ELIGIBILITY REJECTED RESPONSE (Header Reject)

Response Header Segment

This section is fixed. Every position of every field needs to be provided.

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	E1 - Eligibility	
109-A9	Transaction Count	1	A/N	1 - One Occurrence	
501-F1	Header Response Status	1	A/N	R - Rejected	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	2		<FS> AM	
111-AM	Segment Identification	2	A/N	20 – Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	2	A/N	UP TO 200 BYTES	

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	3		<FS> AM	
111-AM	Segment Identification	2	A/N	21 - Response Status Segment	
FS	Field Separator	3		<FS> AN	
112-AN	Transaction Response Status	1	A/N	R - Rejected	
FS	Field Separator	3		<FS> FA	
510-FA	Reject Count	2	N	1 - # Reject Codes that follow	
FS	Field Separator	3		<FS> FB	
511-FB	Reject Code	3	A/N	01 - M/I BIN Number	
FS	Field Separator	3		<FS> FQ	
526-FQ	Additional Message Information	200	A/N	Up to 200 bytes	

--End--

4. ELIGIBILITY REJECTED RESPONSE**Response Header Segment**

This section is fixed. Every position of every field needs to be provided.

Field	Name	Size	Type	Value	Edits/ Requirements
102-A2	Version/Release Number	2	A/N	51	
103-A3	Transaction Code	2	A/N	E1 – Eligibility	
109-A9	Transaction Count	1	A/N	1 - One Occurrence	
501-F1	Header Response Status	1	A/N	A - Accepted	
202-B2	Service Provider ID Qualifier	2	A/N	07 - NCPDP Provider ID	
201-B1	Service Provider ID	15	A/N	NCPDP ID	
401-D1	Date of Service	8	N	CCYYMMDD	

-- End of Fixed Section --

Response Message Segment

Field	Name	Size	Type	Value	Edits/ Requirements
SS	Segment Separator	1		<SS>	
FS	Field Separator	2		<FS> AM	
111-AM	Segment Identification	2	A/N	20 – Response Message Segment	
FS	Field Separator	3		<FS> F4	
504-F4	Message	2	A/N	UP TO 200 BYTES	CALL CSSC

--Transaction Continued--

Response Status Segment

Field	Name	Size	Type	Value	Edits/ Requirements
GS	Group Separator	1		<GS>	
SS	Segment Separator	1		<SS>	
FS	Field Separator	2		<FS> AM	
111-AM	Segment Identification	2	A/N	21 – Response Status Segment	
FS	Field Separator	3		<FS> AN	

Field	Name	Size	Type	Value	Edits/ Requirements
112-AN	Transaction Response Status	1	A/N	R – Rejected	
FS	Field Separator	3		<FS> FA	
510-FA	Reject Count	2	N	1 - # Reject Code follows	
FS	Field Separator	3		<FS> FB	
511-FB	Reject Code	3	A/N		65 – Patient Not Covered or 62 – Patient/Cardholder ID Name Mismatch
FS	Field Separator	3		<FS> 7F	
549-7F	Help Desk Phone Number Qualifier	2	A/N	99 - Other	
FS	Field Separator	3		<FS> 8F	
550-8F	Help Desk Phone Number	18	A/N		

--End--

XVI. Prior Authorization

A. Medical Necessity Overrides

The DoD has created an automated process to allow products requiring Prior Authorization to process with minimal manual administrative efforts. The process is based on the presumption that the provider follows protocols before dispensing a product that requires prior authorization. A dispensing of a product that requires prior authorization will create an automated override for that person for the product being dispensed and eliminate for any other site to follow the described protocol (e.g. eliminate a call to the physician from each point of service the patient uses). Thus if an initial fill occurs at an MTF the TMOP will not be subjected to repeating the protocol required to establish a prior authorization.

Where the TMOP is the first location the patient receives a prior auth product, the TMOP will be engaged to follow the protocols to determine if the dispensing should occur. The process is dependent upon these actions having occurred prior to submission to PDTS. In order to bypass PDTS rejects on products requiring Prior Auth, the TMOP will indicate it took the proper measures before dispensing as follows:

Submit a value of "7" (medical necessity) in the "Submission Clarification Code" field (420-DK) as well as a value of "1" in the "Prior Authorization Type Code" field (461-EU) and a properly formatted end date within the "Prior Auth Number Submitted" field (462-EV). The format of the date should be CCYYMMDD. With this information the transaction in question would be overridden as well as be used to create an override record for future dispensing that occur prior to the end date submitted.

Note: Before performing a prior authorization procedure, the TMOP is required to verify that a prior authorization does not already exist for the patient's medications. This can be accomplished by:

1. Submitting the claim to PDTS to see if it rejects for Prior Auth Required
- OR**
2. Use PDTS help desk tools and query the patients ID to determine if a Prior Auth record exists.

B. Eligibility Overrides

On rare occasions, there will be former spouses that have coverage for specific disease states. These former beneficiaries will generate not eligible responses from DEERS to PDTS.

If the TMOP is asked to provide service to a former spouse with coverage of limited drugs for a previous existing condition it will be the patients responsibility to provide written documentation of this exception.

In order to bypass the eligibility rejection that will be returned by PDTS in these situations, the TMOP needs to do the following:

- Enter a "2" Override in the Eligibility Clarification Code Field (309-C9) to indicate eligibility documentation verified.

Note: This will be a one-time override and documentation must be presented by the patient at each dispensing.

WebMD is going to provide 3 files to "SEED" ESI records with "New Patient ID's". The first will be a test file to prove out the process. The second file will be a Preliminary load for Production purposes. The third file will be a repeat of the second file only based on more current information. The third file, which will be the last of the schedule transfers, will occur on a mutually agreeable date in Jan. The process can be repeated on an as needed basis if there is ever an event that results in an influx of new beneficiaries.

XVII. POINT OF CARE EDITS

I. PRODUR EDITS

Since ESI's post PDTS internal ProDUR editing occurs post PDTS adjudication, the bypass parameters will be turned off. PDTS will edit ESI dispensings again each other.

A. DRUG-TO-DRUG INTERACTIONS

Edit: Level 1 Contraindicated – Reject

Edit: Level 2 Severe/ Potentially Managed – Advisory

Edit: Level 3 Moderate – Advisory

Edit: Level 9 Interaction with alternative medication (e.g. herbal) of unspecified severity level-potentially severe - Disabled

Time Limit: Dispensings within 180 days of date dispensed

Bypass Option: Disabled

Severity Levels used by PDTS correspond to First Data Bank's DDIM release 3.2

Text Message Type - Type A Text Message: Includes "conflicting" NDC and label name of NDC (with potential truncation).

B. THERAPEUTIC DUPLICATIONS/TOO EARLY REFILL/INGREDIENT DUPLICATION

Edit Level – Reject

Tolerance Level – 75% / 10 days

Bypass Option: Disabled

Text Message Type - Type A Text Message: Includes "conflicting" NDC and label name of NDC (with potential truncation).

Time Limit: Dispensings within 180 days of date dispensed

GCN Override: Therapy Duplications detected at the GCN level will return ProDUR conflict code of "ID" With the date of next fill and number of days from dispense date to next fill within the message. Where same GCN override occurs, the text message will contain the date that refill is allowed and the number of days between the dispense date submitted and the dispense date allowed. Example: "Next Fill 01/01/2001 Days=001".

Duplicate Therapy Edit

- i) For selected Therapeutic Classes, this edit will be performed at the Therapeutic Class level (GC3).

a.) Overlaps within the following classes will trigger duplicate therapy edit:

Single Categories

Antidepressants	H2J
Anti-Anxiety	H2F
*Narcotic analgesics	H3A/H3B
Skeletal Muscle Relaxants	H6H
ACE Inhibitors	A4D
Calcium Channel Blockers	A9A
*Lipid Lowering	M4E/M4F
Beta-Adrenergic Blocking Agents	J7C

*H3B is a continuation of H3A. M4F is a continuation of M4E. Those continuations are used when First Data Bank runs out of codes within the same therapeutic class.

b) Overlaps within **OR** across the following classes will trigger Duplicate Therapy edit:

Combined Categories

NSAID, COX inh. type	S2B, S2L
H-2 Antagonists	Z2D, D4E, D4K

- ii) For products that are not within the selected Therapeutic Classes, the edit will be performed at the Ingredient level (HICL).

Hierarchical Ingredient Code List Editorial Policies: The Hierarchical Ingredient Code List is composed of Hierarchical Ingredient Codes (HIC's). Each HIC identifies an active ingredient of a particular drug product (identified by NDC). It also identifies the therapeutic class, pharmacological class and organ system to which the drug is targeted.

The HIC is a six-byte character field utilizing the following format:

First position	Alphabetic
Second position	Numeric
Third position	Alphabetic
Fourth position	Alphabetic
Fifth position	Alphabetic or blank
Sixth position	Alphabetic or blank

The fifth and sixth positions are either both alphabetic or both blank. All six positions uniquely identify an ingredient. The inherent structure of the HIC provides additional information about the ingredient:

<u>Position</u>	<u>Description</u>
1	Identifies Organ System
1 – 2	Identifies Pharmacological Class
1 - 3	Identifies Therapeutic Class
1 - 6	Identifies Ingredient

The first four characters of the HIC uniquely identify an ingredient with the last two characters containing blanks. When an ingredient comes in more than one salt form, the 5th and 6th positions identify the salt / ester. Examples are hydrochloride (HC), sodium (NA), sulfate (SU) or phosphate (PH). When a salt / ester code is applicable, all six positions of the HIC are required to identify the ingredient with the first four identifying, the base ingredient

This full HIC code has been established as the level to perform therapy duplication outside the specific therapeutic classes listed above because it is more specific than GC3's and will eliminate a lot of undesired messages (a.k.a. "noise") identified by the provider community. It is also not as specific as GCN's and will detect overlaps occurring from different forms, routes and strengths.

To illustrate the value of using the HIC level, consider the HIC codes on the following products:

<u>Product</u>	<u>Therapeutic Class (GC3)</u>	<u>HIC</u>	<u>GCN</u>
1. Regular Insulin	C4G	C4GAHR	11642
2. NPH Insulin	C4G	C4GCHR	11160
3. Lopressor 50 mg	J7C	J7CDTT	20642
4. Lopressor 100 mg	J7C	J7CDTT	20641

Products 1 & 2 will not generate therapy duplication. Even though they have the same GC3 and it's **not** a targeted GC3, they have different HIC codes.

Products 3 and 4 will provide therapy duplication. Even though they are not within a target, they have different GCN's, they share the same HIC code.

The route of administration will be considered, for both Therapeutic Class and Ingredient level, and only overlapping ingredients in systemic routes of administration will be edited. Non-Systemic routes of administration products will bypass therapy duplication edits (e.g. topical, ophthalmic, etc).

Examples:

- Tagamet and Zantac are both in a targeted therapeutic class. They will be edited at that level.
- Erythromycin cream and erythromycin tablets are not in a targeted therapeutic class. They will be edited at the HICL level. They are not both systemic routes of administration, so they will bypass the edit.
- Erythromycin cream and erythromycin ophthalmic ointments are not in a targeted therapeutic class. They will be edited at the HICL level. They are both non-systemic routes of administration, so they will bypass the edit.
- Albuterol inhalers and albuterol tablets are not in a targeted therapeutic class. They will be edited at the HICL level. They are both systemic routes of administration, so they will be subjected to duplicate therapy edits.

NOTE: PDTS will perform Therapy Duplication and Drug-to-Drug Interaction according to the rules above based on transactions having different Chain ID's. Transactions with overlaps at the described levels that are for the same chain will not be edited by PDTS. All TMOP NABP's will carry the same Chain ID on the PDTS System. PDTS relies on TMOP to edit these overlaps.

C. EXCESSIVE DOSE

Edit Level – Reject
Tolerance – 60%

D. INSUFFICIENT DOSE

Edit Level – Advisory

E. OVER UTILIZATION

Edit Level – Reject

Tolerance – 60%

Drug Level – GCN level (same product, form, route, strength)

Exceptions – Non-Systemic routes of administration products will bypass over utilization edits (e.g. topical, ophthalmic, etc).

Time Limit – Dispensing within 120 days of date dispensed

PDTS edits that determine if prescribed daily doses fall within published guideline (as maintained by

First Data Bank), are sensitive to patient ages. Patients under age 18 are subjected to Pediatric Maximums/minimums. Patients over age 60 & above are subjected to Geriatric

Maximums/minimums. Because patient weight is not available to the PDTS System, and is required to perform pediatric edits, First Data Bank national age/weight tables will be used to establish patient weights. Tables will be accessed using the age and gender submitted by the provider.

F. UNDER UTILIZATION

Edit Level – Advisory

Tolerance – 50%

Drug Level – GCN level

Exceptions – Maintenance drugs only

Time Limit – Dispensings within 120 days of date dispensed

G. DURATION OF THERAPY

Disabled for TMOP

H. DRUG ALLERGIES

Not edited

I. STEP THERAPY

To be activated upon completion of development.

J. MAX DAYS SUPPLY

Claims submitted with a days supply greater than 110 will be handled as a reject (without override opportunity).

K. Uniform Formulary

At a future point in time, the DoD will establish products that are only covered when Medical Necessity is established. PDTS will reject transactions for those products unless prior authorization has been properly established. See Section XVI for Prior Authorization protocol.

II. PRODUR OVERRIDES

Providers may document the actions taken in response to PDTS messages. Through documentation of the action taken in response to clinical advisories returned by PDTS, the transactions can be successfully flagged on patient profiles. Documentation occurs by selecting the appropriate NCPDP Professional Service and Result of Service Codes and resubmitting the transaction with an indication of the conflict being overridden.

PDTS will be set-up to recognize the following combination of Professional Service and Result of Service Codes:

<u>Professional Service Code</u>	<u>Result of Service Code</u>
M0 (Prescriber Interface)	1A Filled as Is, False Positive
M0 (Prescriber Interface)	1B Filled as Is
M0 (Prescriber Interface)	1C Filled with Different Dose
M0 (Prescriber Interface)	1D Filled with Different Direction
M0 (Prescriber Interface)	1E Filled with Different Drug
M0 (Prescriber Interface)	1F Filled with Different Quantity
M0 (Prescriber Interface)	1G Filled with Prescriber Approval
R0 (Pharmacist Review)	1A Filled as Is, False Positive
R0 (Pharmacist Review)	1B Filled as Is

III. REVERSALS

The PDTS system will reject or advise on advisory transactions that do not pass the clinical edits defined in Chapter XII. PDTS accepted responses will sometimes contain messaging that defines a ProDUR that will indicate to the pharmacist that the dispensing should be altered or not dispensed. In this event, the TMOP screening of the PDTS response should result in a rejected claim response being returned to the pharmacy.

<u>Professional Service Code</u>	<u>Result of Service Code</u>
R0 (Pharmacist Review)	1C Filled with Different Dose
R0 (Pharmacist Review)	1D Filled with Different Direction
R0 (Pharmacist Review)	1E Filled with Different Drug
R0 (Pharmacist Review)	1F Filled with Different Quantity
R0 (Pharmacist Review)	1G Filled with Prescriber Approval
R0 (Pharmacist Review)	2A Prescription not filled
R0 (Pharmacist Review)	2B Prescription not filled, Directions Clarified

IV. NON-CLINICAL EDITS

- Non-Clinical edits are detailed in Section VIII. Transactions not satisfying these edits will result in a rejected claim response without building a profile record.

V. ADMINISTRATIVE EDITS

A. EXCLUDED PRODUCTS

The products shown in Exhibit E will be rejected for Drug Not Covered (NCPDP Reject Code of 70).

B. PRIOR AUTHORIZATION/MEDICAL NECESSITY

The products shown in Exhibit F will be rejected for Prior Authorization Required (NCPDP Reject Code of 75).

C. ACCUMULATIVE DISPENSINGS

The products shown in Exhibit G will be rejected for Plan Limitations Exceeded (NCPDP Reject Code of 76).

Note: If a product requires prior authorization, and also has quantity limits in place, the use of an override for the prior authorization does not automatically remove the need to establish a quantity limit override if the dispensing then exceeds plan limits. The initial claim submission will reject for the NCPDP reject code of 75. A PA value will be submitted on the second claim, which will then reject for the NCPDP reject code of 76. Another PA value will be submitted on the third claim, which should pay.

VI. COPAY ADJUSTMENTS

The products shown in Exhibit H will have their copay level determined based on the Brand/Generic indicator specified.

XVIII. PRICING

PRICING CONFIDENTIALITY POSITION PAPER

WebMD handling of has developed the following a position paper in order to ensure that the confidentiality of the TMOP pricing is maintained.

The Standard design of the PDTS System encompasses many levels of security. In addition, WebMD has contractual requirements to satisfy the Government and TMOP confidentiality requirements. WebMD personnel with access to pricing data and those individuals that establish access privileges will be directed by Government security requirements (and penalties).

As a safeguard to ensure that access privileges granted to non-government, remote users (e.g. the TMOP help desk representatives) do not include pricing information, WebMD proposes a two-step process. Once logins have been established and access privileges defined, a system administrator will be required to use a login to verify that pricing information is locked out. After confirmation by the system administrator, the login will also be utilized by an internal Q/A department to allow a second confirmation that TMOP logins have no access to pricing information. WebMD will require the system administrator and quality assurance representative to document these steps. Login request forms will include the date these steps were performed and the initials of the individual that performed them. Login request forms will be maintained by WebMD and made available to the Government upon request.

WebMD will not provide reporting directly to TMOP. Reporting/Data provided to the Government containing pricing information will be managed according to Government established rules.

IXX. REPORTING/DELIVERABLES

The Government will provide periodic “Standard Reports” to the TMOP. The content, format and frequency of these reports will be coordinated between the Government, WebMD and the TMOP. The PEC has determined it will use WebMD’s standard battery of reporting as well as custom developed DoD reports. The components of the Ad Hoc report package will be modified as additional report requirements are identified by the PEC.

Deliverables from WebMD to the Government will be handled as follows:

1. Data Transfers: On a daily basis, WebMD passes a detail transaction file to the PEC. This file contains submission and response data for each transaction processed by PDTS. Included are accepted and rejected transactions and reversals with ProDUR messages.
2. Data Warehouse Reports: On a weekly basis, WebMD will offload transaction data to a data warehouse accessible to properly authorized PEC users. PEC has the option of using Crystal Report tools to view prepared fixed reports or to use the PRN query tool. These views will be of reports selected by the DoD from WebMD’s suite of reports (See Exhibit D). Reports can be remotely viewed by up to 5 concurrent properly authorized PEC users over a secure line. Reports can be downloaded if desired.
3. Data Warehouse Inquiries: WebMD provides for a browser based on-line query tool using Business Objects. This process is limited to DoD designated personnel. Only DoD "super users" will have ability to write their own queries.
4. TED Billing File: As each TMOP transaction reaches its 11th day on the PDTS system they will be included on the daily TED file. The pricing submitted on the TED file reflects the prices calculated by the PDTS (e.g. Reduced to MCPFP pricing) except for those transactions where the MCPFP price was overridden. Copies of files submitted to TED will be provided to ESI. The format and frequency will be determined.

The TMOP implementation will trigger an elevated level of administrative and financial reports being generated on the data warehouse. In a joint effort with WebMD, the PEC will mock up DoD’s TMOP reporting requirement to allow for predefined queries to be developed that utilizes aggregate data, OLAP codes, new indexes, etc. to maximize performance. By the fifth day after the end of each quarter, a battery of reports will need to be made available to TMA.

XX. HEALTHCARE ACTIVITY SUPPORT

WebMD will provide technical support 24 hours per day, 7 days per week, 365 days per year. Technical support includes calls from designated DoD Information System Support personnel to our Operations Department. Customer support calls reaching our Operations Department should relate to issues such as communication connectivity, response time, and system availability. This technical support service will also be extended to the military Treatment Facilities (MTF) and the Managed Care Support Contractors (MCSC) and TMOP (TriCare Mail Order Pharmacy) connected to the PDTS host.

Additional Customer Service support will be provided to key managers of the DoD and PEC through the Account Executive(s) assigned to DoD. Account Executive support hours are Monday through Friday, 8:30am to 5:00pm EST. Calls placed to our Account Executives are expected to relate to such issues as business rules, system design, system parameter changes, Pro-DUR functionality, file transfers, and general PDTS customer needs. After hours support is available to specified DoD contacts on a pager system basis.

It is understood that first level client support for all Military Treatment Facilities (MTF), MCSC's and TMOP will be handled through a joint effort of the PEC and CSSC. CSSC will have remote access to the PDTS system for troubleshooting client inquiries

WebMD's first level Pharmacy Call Center will also have access to the PDTS system to troubleshoot, coordinate calls, and in general, support DoD activity. WebMD's Pharmacy Call Center will be available to assist CSSC support representatives in the event that they cannot bring closure to support requests. Few, if any, calls are expected to be received in WebMD's Pharmacy Call Center from DoD personnel.

NCPDP v5.1 CERTIFICATION POLICY AND PROCEDURES FOR PDTS

This document will describe the type of claims that will be required to be submitted in order to be certified as compliant with NCPDP v5.1. We will also review the validation process that the certification claims will go through.

The PDTS NCPDP v5.1 certification process has expanded in scope to include multiple objectives:

1. Validate that transactions are being submitted according to defined specifications (e.g. technically correct).
2. Validation by both parties that the PDTS process is performing to expectations.
3. Opportunity to perform reasonability checks that data submitted not only satisfies on-line processing requirements, but also ensures that the integrity of data passed onto the data warehouse. Scope of the certification will include the examination of all data elements, including, but not limited to cost fields, copay amounts, refill numbers, etc. Certification will ensure that “balancing formulas,” built into v5.1 are being observed.
4. Test packets will be tailored around the Certification Questionnaire responses. Testing of Compounds, Partial Fills and Multiple Reversals will occur based on TMOP functionality.

The scripted set of test transactions must be successfully submitted **IN ORDER** to be certified. The set of transactions will include claims and reversals, with accepted, rejected and duplicate responses. In order to produce the expected results, it is critical that you transmit the test transactions in the exact order listed in the document. You will be requested to document the result of how you’re handling the PDTS response (e.g. Screen Prints). Due to the expanded scope of the certification process, the number of test transactions will be increased. All certifications transactions must be generated from the application program that will be used in production (e.g. not generated by an editor program). There will be no exception or partial certifications granted, all aspects of the tests must be satisfied.

We are currently requesting test legacy DEERS ID numbers that will be used for certification and general functionality testing. The unique ID number for TMOP will be contained in the Certification Document.

During the testing periods, WebMD Technical Support will attempt to cause timeouts. Since the TMOP has specific handling of timeout occurrences (i.e. system not available), we will try to force this occurrence to validate that these processes are working properly.

Test dates will be assigned to the TMOP based on when the v5.1 functionality will be developed on their system. We will distribute the test dates and transactions two weeks after the Certification Questionnaire has been returned.

PDTS will be ready to begin v5.1 testing on the following dates:

- 15 July 2002 – Scripted Certification Transactions for Basic Functionality
- 6 August 2002 – Scripted Certification Transactions for Enhanced Functionality

Once the certification transaction for both basic and enhanced v5.1 has been successfully transmitted and validated, the TMOP will have scheduled blocks of time for performing open general functional testing. This general functional testing will not begun until 6 August 2002.

Summary of items to be validated by the Certification Packet:

- ❖ Validate field formats and values
- ❖ Validate required fields are present
- ❖ Reasonability check on all dollar amount fields
- ❖ Validate implied decimals for dollar fields and metric decimal quantity
- ❖ Validate that zip codes are being properly sent
- ❖ Validate the content of the Cardholder ID field (SSN and DDS)
- ❖ Validate the submission of compounds based on new functionality
- ❖ Validate submission of Partial Fills
- ❖ Validate submission of Multiple Reversals
- ❖ Validate receipt of DUR responses and overflow indicator
- ❖ Validate responses on:
 - Duplicates on both claims and reversals
 - Rejections
 - DUR

NCPDP v5.1 Certification Questionnaire

MCSC NAME:

PBM / PROCESSOR NAME:

ADDRESS:

PRIMARY CONTACT #: _____
(Name) (Title)

PRIMARY PHONE #: _____
(Voice) (Fax)

PRIMARY E-MAIL : _____
(E-Mail Address)

SECONDARY CONTACT: _____
(Name) (Title)

SECONDARY PHONE #: _____
(Voice) (Fax)

SECONDARY E-MAIL: _____
(E-Mail Address)

SYSTEM TRADE NAME:

HARDWARE:

SIGNED: _____
(Authorized signature) (Date)

What date will basic v5.1 functionality be ready to test:

Please indicate your intended handling of Compounds, Partial Fills and Multiple Reversals.

Compound Approach

☐ Most Expensive Ingredient☐ Multiple Ingredient

Date ready to test: _____

Partial Fill

☐ Yes, submission will include partial fills☐ No, submission will **NOT** include partial fill

Date ready to test:

Multiple Reversals

☐ Yes, submission will include multiple reversals

☐ No, submission will **NOT** include multiple reversals

Date ready to test: _____

NOTE: ACCESS TO THE CERTIFICATION SYSTEM ON 15 JULY 2002 WILL NOT BE GRANTED UNLESS THIS APPLICATION IS RETURNED.

Please return this form to Nancy Nemes at the following address:

nnemes@webmd.net

WebMD
2045 Midway Drive
Twinsburg, OH
44087
ATTN: Nancy Nemes

Any questions, please call 330.425.3241:

Nancy Nemes	ext. 50042
Suzanne Bauman	ext. 50006

TMOP/PDTS Testing Document

I. Telecom Testing

Counted as 1 test **status: 0%**

Ping testing

Test Procedure: If ICMP messages are allowed the TMOP site should conduct ping tests to verify that each PDTS switch can be reached. The PDTS should also verify connectivity to the TMOP from each PDTS switch. If fire walling on either side blocks host-to-host ping testing, a ping test should be conducted from the Ethernet port on the TMOP router to the Ethernet port on the PDTS router. This test should also be conducted from the PDTS router to the TMOP router. Both the TMOP and the PDTS should record response times.

Results:

Action items:

Socket testing

Test Procedure: This test should follow ping testing to verify socket connections and, should ICMP messages be restricted between the TMOP and the PDTS sites, this step can serve as an alternative way to verify connectivity. The front-end process on the PDTS switches will be started and the TMOP host will establish a socket connection to the OH (159.132.159.20 255.255.255.0) and TN (159.132.194.20 255.255.255.0) switches on the assigned production and test port numbers. Application Development at the PDTS will verify that the connection to the test port has been established and test data can be passed in both directions to verify bi-directional connectivity.

Results:

Action items:

ENP Header Verification

Counted as 1 test

status: 0%

TCP/IP Communications Protocol Message Layout for Connections Inbound to the PDTs Switch

The following specifies the message format between endpoints.

<u>Position</u>	<u>Length</u>	<u>Contents</u>
1-3	3	Start of Message Sequence (hex DF, 2C, DF)
4-5	2	Version
6-7	2	Type
8-15	8	Sequence Number
16-19	4	Source = TMOP
20-23	4	Destination
24-27	4	Data Length
28	1	Start of Data Delimiter (hex E0)
29-n	n	Data
n+1	1	End of Data Delimiter (hex E1)

NOTES

Start of Message Sequence (Position 1-3)

Transactions having an improper Start of Message Sequence 223,223 (hex DF, 2C,DF) will not be recognized as valid data and will be discarded without a report sent back to the client.

ENP Version (Position 4-5)

The client must supply a proper version number in positions 4-5. Claims that do not have the same version number as the WebMD process accepting the claim will be returned to the client with the error message: "Wrong Version".

The version supported by the PDTs system for MTF usage will be "02". Retail (MCSC, TMOP) will continue to use the "01" version until further notice.

Record Type (Position 6-7)

For any claim sent to WebMD, the client must include the character sequence of "CQ" in positions 6-7. Clients who want to submit "dummy" transactions may include a character sequence of "DQ" in position 6-7. Claims that do not have either a "DQ" or "CQ" in position 6-7 will be returned with the error message: "Invalid Enp Type".

All responses to type CQ claims will be returned by WebMD with a "CR" in position 6-7. NOTE: All claims which have any enp header error described in this document will be sent back with an "ER" in positions 6-7. Those that have routing errors will be returned with an "SE" in positions 6-7. Responses to "dummy" transactions will have a "DR" in positions 6-7.

TCP/IP Communications Protocol Message Layout for Connections Inbound to the WEBMD Switch

Sequence Number (Position 8-15)

The client uses position 8-15 to supply a sequence number for the claim being sent. This field can be filled with ASCII characters in the numeric range (0x30 to 0x39), or in the alphabetic range (upper case: 0x41 to 0x5a) (lower case: 0x61 to 0x7a). Special Characters are NOT ALLOWED. If the customer

wants to multi-thread claims, the sequence number must be unique for each transaction (claim and reversal) for a minimum of 24 hours.

Claims that have a value that is not alphanumeric in position 8-15 will be returned with the error message: "Non Alphanumeric Sequence Number". NOTE: WebMD will make a best effort to return claims that have any ENP error with the customer generated sequence number. Many error conditions covered by the ER type indicate that the ENP header is invalid; therefore it may not be possible to return the sequence number on all ER messages. The sequence number will always be returned on all CR, DR, and SE messages.

The Sequence Number is also used by PDTs in editing for duplicate transaction caused by communication problems. These duplicate transactions are considered Phantom Claims. Phantom Claims logic uses the following fields to determine if this claim has already been processed: Sequence Number, Processor Control Number, NCPDP Number, Prescription Number and Date Filled. When the claim is received on the PDTs processor, it will check to see if that combination has already been processed. If the PDTs finds that this is a Phantom Claim, a duplicate claim response will be returned.

Source (Position 16-19)

The client must fill positions 16-19 with a source value supplied by WebMD. This four-byte field uniquely defines the client. Any claim that does not contain the source value that was supplied by WebMD will be returned to the client with the error message: "Incorrect Value in Source Field".

Destination (Position 20-23)

The destination field should be filled with the value assigned by WebMD. NOTE: Claim Responses (type "CR") that the client receives back from WebMD will have the source and destination fields in opposite order to the way that it was sent. NOTE: in the case of ER messages, it may not be possible to correctly determine the source and return it as the destination. The source field will be populated by 'X's in this case.

Data Length (Position 24-27)

The client MUST use position 24-27 to fill in the number of bytes that are in the claim that is being sent – this count ONLY includes the number of bytes in the pharmacy claim and does NOT include a count of any header data, and does NOT include the SDD (Start Data Delimiter) or EDD (End Data Delimiter) characters.

If this field contains ASCII characters outside of the numeric range (0x30 to 0x39), the claim will be returned with the error message: "Data Length contains non-numeric char". If the claim contains an incorrect *value* an error will be returned indicating that an EDD could not be found (see below).

Start of Data Delimiter (Position 28)

Position 28 MUST contain the character 224 (hex 0xE0). This is the Start of Data Delimiter. If position 28 does not contain this character the claim will be returned with the message: "Missing ENP_STX".

End of Data Delimiter

The End of Data Delimiter is character 225 (hex 0xE1), and must follow the last byte of the pharmacy claim. When the receiving process at WebMD receives a claim, this position is calculated by adding the length of the header (28 bytes) to the length of the claim, which is determined from the Data Length field. If an EDD character is not found at this calculated position the claim will be returned with the message: "Missing ENP_ETX".

ENP Error Messages

As noted in the description of the type field, there are two kinds of errors encoded within the ENP header ER and SR.

ER: The ENP Error Response type is used to indicate a problem with the ENP protocol itself. Such errors could result from incorrect implementation, or a data corruption problem introduced by the communication

Errors of this type will be differentiated by returning an error string within the data segment (Positions 29-n).

It should be noted that more than one thing could be detected as incorrect. Therefore all errors text messages of the ER type will begin:

"NN enp errors found in last read. ENP ERROR LIST>>>>>"

Note that the double quotes are used for clarity of documentation and will not appear in the error string itself.

Where NN is the number of errors found. The errors will be separated by the "*" character.

ENP Error Message Test

A test should be conducted to verify the TMOP system is capable of handling receipt of an ER response. For simplification the TMOP can create a transaction that will generate one or more of the error strings shown below. There is no need to test how the TMOP reacts to receipt of each of the messages below unless special logic will be implemented on the TMOP system for a given error string. WebMD suggests sending a transaction where the ENP header is populated with the wrong version number.

Results:

Action items:

Possible error strings are:

1	"Wrong Version"	Version unsupported by this application. The customer-generated sequence # will be returned in the ENP header, if possible. Position/length of sequence # may change with new version.
2	"Non AlphaNumeric Sequence Number"	Something not A-z0-9 in sequence. The customer-generated sequence # will be returned in the ENP header.
3	"Data Length contains non-numeric char"	Something not 0-9 in length. The customer-generated sequence # will be returned in the ENP header.
4	"Invalid Enp Type"	Type not one of CQ DQ. The customer-generated sequence # will be returned in the ENP header.
5	"Incorrect Value in Source Field"	Source field value not valid. The customer-generated sequence # will be returned in the ENP header.
6	"Missing enp_STX"	Data segment starting delimiter absent. The customer-generated sequence # will be returned in the ENP header, if possible.
7	"Missing enp_ETX"	Data segment closing delimiter missing (based on incorrect data length in ENP header). The customer-generated sequence # will be returned in the ENP header, if possible.
8	"Zero Length Packet"	Query has no data. The customer-generated sequence # will be returned in the ENP header.
9	Bad ENP start sequence	ENP start signature (pos. 1-3) missing or bad. WebMD will not return an error message, the transaction will be thrown away.
10	Incomplete enp in buffer (data fragmentation)	Receipt of incomplete message. WebMD will not return an error message, the transaction will be thrown away.

SE: The ENP Switching Error type is used to indicate a communication problem within the Online Transaction Processing System. The processing host either could not be reached or did not respond in time.

The data segment of the ENP message will contain the following when a problem occurs:

"TSHARED UNAVAILABLE"	The front-end interface on the PDTS switch is unable to logically connect to the switching function within the PDTS switch. This strongly implies severe problems on the PDTS Switch. WebMD Technical Support should be contacted.
"TSHARED NOT RESPONDING"	The front-end interface did not receive a response in time (e.g. timer "x+y" has expired) and has given up on this particular transaction. This is probably a transient error and the transaction should be resent.
"PDTS NOT RESPONDING"	The PDTS processor did not respond to the PDTS switch in time (e.g. timer "x" has expired) and has given up on this particular transaction. This is probably a transient error and the transaction should be resent.
"SWITCH UNAVAILABLE"	Reserved for future use
"PDTS UNAVAILABLE"	Reserved for future use
"PDTS UNAVAILABLE AND WAIT: 000000"	This response indicates there has been a transient error processing this particular transaction (e.g. record lock) and indicates that the transaction should be resent immediately.
"PDTS UNAVAILABLE AND WAIT: 001500"	This response indicates there has been a moderate error processing this particular transaction and it should not be resent for 15 minutes.
"PDTS UNAVAILABLE AND WAIT: 040000"	This response indicates there has been a severe problem processing this particular transaction and it should not be resent for 4 hours.

***More Error messages and the appropriate reaction may be published at a later date**

Dummy Transactions

Counted as 1 test

status: 0%

In order to test for complete end-to-end connectivity from the client application at the TMOP to the PDTS Processing host it is necessary to send a transaction. For ease of handling at the TMOP such transactions may be distinguished by enclosing them in an ENP with a "DQ" type. The response will be returned with a "DR" type. The handling of such transactions within the PDTS will be otherwise indistinguishable from normal "CQ" type queries.

Dummy transactions will be sent by the TMOP system following each successful attempt to open a socket or if a response is received from WebMD indicating that the TMOP system should send dummy transactions (e.g. TSHARED UNAVAILABLE). Dummy transactions will be sent by the TMOP system until a good, dummy response (DR) is received. Once a dummy transaction is sent, the TMOP system will attempt to receive 'any' responses from WebMD for a period of X seconds. If a failed dummy response is received, or no response is received the TMOP system will wait for a set period of time before sending another dummy transaction. If no response is received for x number of consecutive dummy transactions, the TMOP client application should close/reopen the socket, then continue to send dummy transactions. Upon receipt of a single, good, dummy response (DR), the TMOP system will begin sending claims.

III. DoD Interface Testing

Notice: Portions of this testing assume that the testers have reviewed Sections IV and V of the ICD covering the system and network architecture. This section also assumes the testers have reviewed a copy of the "Contingency Plan for Handling PDTS Transactions Whenever PDTS Processing is Not Available" Revised 5/25/00 which describes the TMOP use of a current queue and backlog queue to send transactions.

Overview:

Connectivity lost from an individual TMOP

Counted as 1 test

status: 0%

Expected Functionality: the TMOP host detects an error condition when a socket connection to the PDTS switch is lost. If both of the socket connections are lost the TMOP should start performing local PDUR for all transactions including transactions that were in flight when the connections were lost. Any transactions repeatedly experiencing a transmission error, exceeding a predetermined number of retries, should be placed in the backlog queue and held until the connection is re-established. Once the connection is re-established transactions will be resent, using the same sequence number, over a single threaded socket connection to the OH PDTS Switch if available. If it is apparent the OH PDTS Switch will be unavailable for an extended period of time the TMOP can open a socket connection to the TN PDTS Switch to send transactions from the backlog queue. Transactions should never be sent from the backlog queue to both PDTS Switches at the same time to ensure transactions are received and responded to in sequential order. If the connectivity loss is caused by a local loop failure the PDTS supplied router should establish a dial backup connection and re-establish connectivity.

Once connectivity is restored the TMOP should try to re-establish the socket connections and qualify the connections by sending dummy transactions. If the TMOP does not receive a valid response to x number of dummy transactions the TMOP will drop and reestablish the socket connection then qualify the new connection by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction, the connection should be deemed available and all transactions, including those processed locally, should be sent to the PDTS where PDUR will be performed by the PDTS system. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent.

When the local loop is restored the PDTS supplied router will disconnect the dial backup connection and return service to the Frame Relay network. The TMOP should then try to reestablish the socket connections and qualify the connections by sending dummy transactions. If the TMOP does not receive a valid response to any of x number of dummy transactions the TMOP will drop and reestablish the socket connection then qualify the new connection by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction, the connection should be deemed available and all transactions, including those processed locally, should be sent to the PDTS where PDUR will be performed by the PDTS system. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent.

Simulation Procedure: To simulate this test the Serial interface connecting the PDTS supplied router at the TMOP site to the Frame Relay network should be disconnected simulating a local circuit failure. The TMOP should recognize that the socket connections have been lost and perform local PDUR while trying to re-establish the socket connections with the failed PDTS sites. Any transaction experiencing a transmission error exceeding a predetermined number of retries should be placed in the backlog queue and held until the connection is re-established. The PDTS Supplied router will establish a dial backup connection to the OH PDTS site. The TMOP should re-establish and qualify the socket connections by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction, the connection should be deemed available and all transactions, including those processed locally, should be sent to the PDTS where PDUR will be performed by the PDTS system. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent

that the OH PDTs Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTs Switch so that transaction in the backlog queue can be sent. Verification should be done to determine that the PDTs processor performs PDUR against all transactions. Once the dial backup connection and expected transaction processing has been confirmed to work the serial interface should be connected and Frame Relay service should be restored. The TMOP should reestablish and qualify the socket connections by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction, the connection should be deemed available. Once both connections are restored the TMOP should begin sharing the transaction load between the two PDTs switches. Those transactions held in the backlog queue should be sent single threaded to the OH PDTs Switch if available. If it is apparent that the OH PDTs Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTs Switch so that transaction in the backlog queue can be sent. Verification should be done to determine that all transactions processed locally during the return to the Frame Relay connection are sent to the PDTs switches and that the PDTs processor performs PDUR.

Results:

Action items:

Failure of PDTs Switch Front-end Process

Counted as 1 test

status: 0%

In order to facilitate testing and eliminate the risk of affecting production traffic test ports, test front-ends and test back-ends, should be setup on the PDTs switches to provide a method of simulating switch failures. Testing PDTs switch failures should not be done using a production port.

Expected Functionality: The TMOP host detects an error condition when a socket connection to the PDTs switch is lost. If a single switch connection is lost the TMOP should reroute that particular transaction and all subsequent transactions to the remaining available PDTs switch. Any transactions repeatedly experiencing a transmission error, exceeding a predetermined number of retries, should be placed in the backlog queue. If the loss of connectivity affects the TMOP system's ability to reach the OH PDTs Switch the transactions should be held until the connection is re-established. Once the connection is re-established transactions will be resent, using the same sequence number, over a single threaded socket connection to the OH PDTs Switch if available. If it is apparent the OH PDTs Switch will be unavailable for an extended period of time the TMOP can open a socket connection to the TN PDTs Switch to send transactions from the backlog queue. Transactions should never be sent from the backlog queue to both PDTs Switches at the same time to ensure transactions are received and responded to in sequential order. The TMOP will try to re-establish the socket connection and qualify the connection by sending dummy transactions. If the TMOP does not receive a valid response to any of x number of dummy transactions the TMOP should drop and reestablish the socket connection then qualify the new connection by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction the connection should be deemed available and the TMOP should begin sharing the transaction load between the two PDTs switches. Those transactions held in the backlog queue should be sent single threaded to the OH PDTs Switch if available. If it is apparent that the OH PDTs Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTs Switch so that transaction in the backlog queue can be sent. If the problem persists WebMD's Technical Support should be contacted. Complete functionality should be verified for failure of each PDTs switch.

Simulation Procedure: Both sites must be tested individually, the TN PDTs switch should be taken out of service first then the OH PDTs switch. The recommended failure procedure would be to stop the

front-end process on the TN PDTS switch handling the unique test port number the TMOP is connected to, this will simulate a complete switch failure. The TMOP should recognize a socket connection has been lost and route transactions to the OH PDTS switch while trying to reestablish a socket connection with the failed TN PDTS site. Any transactions experiencing a transmission error exceeding a predetermined number of retries should be placed in the backlog queue and resent from that queue to the OH PDTS Switch using the same sequence number. The PDTS will restart the front-end process on the TN PDTS switch. Once a socket connection is established dummy transactions should be sent to qualify the connection. If the TMOP does not receive a valid response to any of x number of dummy transactions the TMOP should drop and reestablish the socket connection then qualify the new connection by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction, the connection should be deemed available. Once connectivity is restored the TMOP should begin sharing the transaction load between the two PDTS switches.

Upon completion of this test the OH PDTS switch front-end process should be stopped. All transactions from the TMOP site should be rerouted to the TN PDTS switch. All transactions experiencing a transmission error exceeding a predetermined number of retries should be placed in the backlog queue and resent from that queue to the OH PDTS Switch when available. If it is apparent that the connection to OH will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transactions in the backlog queue can be sent. The same functionality with regard to dummy transactions and load sharing listed above should be seen during this test scenario. Once again this should only be tested using the test ports, test front-ends, and test back-ends setup on the PDTS switches.

Results:

Action items:

PDTS Switch “TSHARED NOT RESPONDING”

Counted as 1 test

status: 0%

In order to facilitate testing and eliminate the risk of affecting production traffic test ports, test front-ends and test back-ends, should be setup on the PDTS switches to provide a method of simulating switch failures. Testing PDTS switch failures should not be done using a production port.

Expected Functionality: The error message “TSHARED NOT RESPONDING” will be generated by the PDTS Switch when timer (Timer x + y) expires. The likelihood of seeing this error message is extremely rare and would normally be a transient problem. The TMOP should take appropriate action to retry the same transaction to the same PDTS switch and once resent that transaction should be processed normally. Should the TMOP receive this error message for the same transaction resent to the same PDTS switch z number of times the TMOP will reroute that particular transaction and route all subsequent transactions to the alternate PDTS switch. Any transactions repeatedly experiencing a transmission error, exceeding a predetermined number of retries, should be placed in the backlog queue. If the error condition affects the TMOP system’s ability to reach the OH PDTS Switch the transactions should be held until the connection is re-established. If it is apparent the OH PDTS Switch will be unavailable for an extended period of time the TMOP can open a socket connection to the TN PDTS Switch to send transactions from the backlog queue. The TMOP should then try to qualify the socket connection by sending dummy transactions. If the TMOP does not receive a valid response to any of x number of dummy transactions the TMOP will drop and re-establish the socket connection then qualify the new connection by sending dummy transactions. Once the TMOP receives

a good response to a dummy transaction the connection should be deemed available and the TMOP should begin sharing the transaction load between the two PDTS switches. . Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent. If the problem persists WebMD's Technical Support should be contacted.

Simulation Procedure: The recommended test procedure is to have the back-end or TSHARED setup with its timer (Timer x) being greater than the front-end timers (Timers x + y) which will be set to an inordinately low value. This will allow the front-end timers to expire and the PDTS switch will generate the "TSHARED NOT RESPONDING" error message. The PDTS will leave the timers setup so that the error message persists. The TMOP after seeing the same error message for a transaction resent to the same PDTS switch z number of times, will reroute that particular transaction and all subsequent transactions to the alternate switch and deem that particular PDTS switch connection unavailable. Any transaction that repeatedly experiences a transmission error exceeding a predetermined number of retries should be placed in the backlog queue to be resent using the same sequence number. TMOP should then try to qualify the socket connection by sending dummy transactions. If the TMOP does not receive a valid response to any of x number of dummy transactions the TMOP should drop and re-establish the socket connection then qualify the new connection by sending dummy transactions. Once this functionality is verified the PDTS will modify the timer values to allow proper responses to be returned to the TMOP. Once the TMOP receives a good response to a dummy transaction the connection should be deemed available and the TMOP should begin sharing the transaction load between the two PDTS switches. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent. If the problem persists WebMD's Technical Support should be contacted.

Results:

Action items:

PDTS Switch "TSHARED UNAVAILABLE"

Counted as 1 test

status: 0%

In order to facilitate testing and eliminate the risk of affecting production traffic test ports, test front-ends and test back-ends, should be setup on the PDTS switches to provide a method of simulating switch failures. Testing PDTS switch failures should not be done using a production port.

Expected Functionality: This error message is an indication of a severe malfunction of the PDTS switch. The TMOP should take appropriate action to immediately reroute that particular transaction and route all subsequent transactions to the remaining available PDTS Switch. The TMOP should immediately deem that particular switch connection unavailable. Any transactions repeatedly experiencing a transmission error, exceeding a predetermined number of retries, should be placed in the backlog queue. If the error condition affects the TMOP system's ability to reach the OH PDTS Switch the transactions should be held until the connection is re-established. If it is apparent the OH

PDTS Switch will be unavailable for an extended period of time the TMOP can open a socket connection to the TN PDTS Switch to send transactions from the backlog queue. TMOP should then try to qualify the socket connection by sending dummy transactions. If the TMOP does not receive a valid response to any of x number of dummy transactions the TMOP should drop and reestablish the socket connection then qualify the new connection by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction the connection should be deemed available and the TMOP should begin sharing the transaction load between the two PDTS switches. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent. If the problem persists WebMD's Technical Support should be contacted.

Simulation Procedure: The recommended test procedure is to disable the OH TSHARED process on the switch, which will generate the "TSHARED UNAVAILABLE" error message. The TMOP should verify receipt of this error message and take appropriate action to immediately reroute that particular transaction and all subsequent transactions to the remaining available PDTS Switch Any transaction that repeatedly experiences a transmission error exceeding a predetermined number of retries should be placed in the backlog queue to be resent using the same sequence number. The TMOP should then try to qualify the socket connection by sending dummy transactions. If the TMOP does not receive a valid response to any of x number of dummy transactions the TMOP should drop and re-establish the socket connection then qualify the new connection by sending dummy transactions. Once this functionality is verified the PDTS will restart the TSHARED to allow proper responses to be returned to the TMOP. Once the TMOP receives a good response to a dummy transaction the connection should be deemed available and the TMOP should begin sharing the transaction load between the two PDTS switches. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent. If the problem persists WebMD's Technical Support should be contacted.

Results:

Action items:

PDTS Processor "PDTS NOT RESPONDING"

Counted as 1 test

status: 0%

Test environments should be used on the Primary and Secondary PDTS processors, for the purpose of this testing.

Expected Functionality: The error message PDTS NOT RESPONDING should be generated by the PDTS Switch when the appropriate timer (Timer x) expires. The likelihood of seeing this error message is extremely rare and would normally be a transient problem. The TMOP should take appropriate action to retry the same transaction to the same PDTS switch and once resent that transaction should be processed normally. Should the TMOP receive this error message for the same transaction resent to the same PDTS switch z number of times the TMOP will reroute that particular transaction and route all subsequent transactions to the alternate PDTS switch. Any transactions repeatedly experiencing a transmission error, exceeding a predetermined number of retries, should be placed in the backlog queue. If the error condition affects the TMOP system's ability to reach the OH PDTS Switch the transactions should be held until the connection is re-established. If it is apparent the

OH PDTS Switch will be unavailable for an extended period of time the TMOP can open a socket connection to the TN PDTS Switch to send transactions from the backlog queue. The TMOP should then try to qualify the socket connection by sending dummy transactions. If the TMOP does not receive a response to any of x number of dummy transactions the TMOP will drop and reestablish the socket connection then qualify the new connection by sending dummy transactions. Once the TMOP receives a good response to a dummy transaction the connection should be deemed available and the TMOP should begin sharing the transaction load between the two PDTS switches. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent. If the problem persists WebMD's Technical Support should be contacted.

Simulation Procedure: The recommended test procedure is to have the back-end or OH TSHARED setup with its timer (Timer x) being much less than the front-end timers (Timers x + y). This will allow the back-end timer (Timer x) to expire and the PDTS switch will generate the "PDTS NOT RESPONDING" error message. The TMOP should verify receipt of this error message and take appropriate action to retry the same transaction, multiple times, to the same PDTS switch generating the error message. The PDTS will leave the timers setup so that the error message persists. The TMOP after seeing the same error message for a transaction resent to the same PDTS switch z number of times, will reroute that particular transaction and all subsequent transactions to the alternate switch and deem that particular PDTS switch connection unavailable. Any transaction that repeatedly experiences a transmission error exceeding a predetermined number of retries should be placed in the backlog queue to be resent using the same sequence number. The TMOP should then try to qualify the socket connection by sending dummy transactions. If the TMOP does not receive a response to any of x number of dummy transactions the TMOP should drop and re-establish the socket connection then qualify the new connection by sending dummy transactions. Once this functionality is verified the PDTS will modify the timer values to allow proper responses to be returned to the TMOP. Once the TMOP receives a good response to a dummy transaction the connection should be deemed available and the TMOP should begin sharing the transaction load between the two PDTS switches. Those transactions held in the backlog queue should be sent single threaded to the OH PDTS Switch if available. If it is apparent that the OH PDTS Switch will be down for an extended period of time the TMOP has the option to open a socket connection to the TN PDTS Switch so that transaction in the backlog queue can be sent. If the problem persists WebMD's Technical Support should be contacted.

Results:**Action items:**

MCSC/TMOP Information

Below is a table that contains important information about each of the MCSC's involved with the PDTS Project. The Processor Control Number identifies each MCSC/TMOP and is sent on the ENP header of a pharmacy transaction. The PCN's are used as MCSC identifiers in the Data Warehouse. The information below also includes each MCSC contract holder, claims processor and processing vendor system.

PCN	Contract Holder	Claims Processor	Processing System Vendor
770383	Sierra	PharmaCare	SXC
770384	Humana 2/3/4/5	Argus Health	DST
770385	TriWest	ESI– Express Scripts, Inc	ESI
770386	HealthNet 9/10/12	Advance PCS	SXC
770393	HealthNet 6/11	Advance PCS	SXC
770404	TMOP	ESI – Express Scripts, Inc.	ESI

TMOP HOURS OF OPERATIONS

Mail Order Hours

(hours prescriptions are filled):

Monday - Friday 8:00AM-9:00PM

Saturday 9:00AM-4:00PM (70% staffed)

Sunday 5:00AM-4:00PM (30% staffed)

Call center (hrs of support)/IVR:

24 X 7

TMOP Maintenance Window:

Sundays 12:01AM-6:00AM

Please note that all times are Mountain Time

Product Exclusions (Reject Code = 70)

Product	Codes	Footnote
Injectables	Exclude Route (GCRT) Codes	
	A	
	C	
	E	
	G	
	I	
	N	
	P	
	K	
	O	
	2	
	9	
	Reinclude GC3	
Insect Sting Kits	J5F	
Antihemophilic factors (incl. VII, VIII, IX)	M0E	
	M0F	
	M0J	
	Reinclude HICL	
glucagon	M4GA	
darbepoetin alfa	N1BD	
epoetin alfa	N1BB	
filgrastim	N1CA	
fondaparinux	M9KR	
goserelin acetate	P1MA	
interferon alpha 2a	Z2GA	
interferon alpha 2b	Z2GB	
interferon alfacon-1	Z2GQ	
interferon beta 1a	H0EB	
interferon beta 1b	H0EC	
interferon gamma 1b	Z2GE	
peginterferon alfa 2a	Z2GY	
peginterferon alfa 2b	Z2GW	
glatiramer acetate	H0EA	
leuprolide	P1MD	
dalteparin	M9KD	
enoxaparin	M9KG	
tinzaparin	M9KJ	
octreotide	P1BA	
sargramostin	N1CB	
somatrem	P1AB	
somatropin	P1AA	
triptorelin pamoate	P1MC	
PEG filgrastim	N1CF	2
HCG injections	P0BA	
teriparatide	P4AB	
adalimumab	S2JB	
pegvisomant	P1QA	
aprepitant	H6MA	
insulins	C4GL	
	C4GK	
	C4GJ	
	C4GI	
	C4GH	

	C4GE	
	Reinclude GCN	
heparin sodium (5,000 and 10,000 units/ml)	25697	
	25690	
	25680	
	25681	
	25691	
promethazine 25 mg/ml	14990	
	14981	
cyanocobalamin	94594	
	94592	
	94595	
dihydroergotamine 1 mg/ml	01590	2
sumatriptan	50741	2
	50742	2
Rebetron	22221	
	22224	
	22222	
	22225	
	22220	
	22223	
calcitonin inj.	26431	
alprostadil inj.	22961	2
	02299	2
	02292	2
	02294	2
	02293	2
	02291	2
	22962	2
	22963	2
	50125	
efalizumab	20582	
desmopressin acetate	26202	
	10860	
	10260	
insulins	05590	
	50101	
	18488	
	06701	
	05560	
	05540	
	05331	
	00890	
	15518	
	11620	
	09631	
	09633	
	05720	
	05473	
	05440	
OTC	Exclude Drug Class (CL) Code	
	O (OTC = Y)	
	Reinclude GC3	
Except urine glucose test strips	R3U	2
	R3W	2
	R3Y	2
	R3Z	2
	Reinclude GCN	
Except blood glucose test strips	25200	2

	Reinclude HICL (GC4)	
Except home injection and insulin needles/syringes	X2AB	2
	X2AC	2
	X2BD	2
	X2BH	2
	X2BJ	2
	X2BS	2
Except spacers	Y7AH	
Aging Process (UNLESS AGE 35 AND UNDER)	Exclude GC3	
	L9B	
	Reinclude GCN	
Except adapalene	29300	
	29301	
	29302	
	92183	
Hair Growth	Exclude GC3	
	L1C	
Obesity	Exclude DCC	
	F	
Smoking	Exclude DCC	
	J	
Vitamins (except Niacin, Folic Acid, Vitamin D, K, Prenatal (age 45))	Exclude GC3	
	C6A	
	C6B	
	C6C	
	C6E	
	C6G	
	C6H	
	C6I	
	C6J	
	C6L	
	C6N	
	C6O	
	C6P	
	C6Q	
	C6R	
	C6S	
	C6T	
	C6U	
	C6V	
	C6W	
	C6X	
	C6Y	
	C6Z	
Except B-12 Injectable	Reinclude GCN	
	94594	
	94601	
	94620	
	93541	
	90101	
	88670	
	13984	
Except B-12 Intranasal	94519	
Except Foltx	92172	
Except Folgard Rx	12466	
Except renal vitamin combinations	04332	
	93559	
	93054	
	17707	
Except Legend Prenatal (age 45 and under)	11161	

	11162	
	11169	
	11172	
	11178	
	12243	
	12607	
	13207	
	13366	
	13461	
	15036	
	16800	
	17309	
	17312	
	21445	
	17599	
	18561	
	18562	
	18563	
	18564	
	18566	
	25591	
	25593	
	25594	
	42212	
	50159	
	50565	
	70889	
	83671	
	87601	
	90839	
	92984	
	93489	
	94121	
	95210	
	95220	
	95339	
	95410	
	95411	
	95413	
Contraceptive Creams, Foams, Jellies	Exclude GC3	
	G9A	
Contraceptive Injections	Exclude GC3	
	G8C	
Contraceptive Implants	Exclude GC3	
	G8B	
Homeopathic Preparations	Exclude GC3	
	U5A	
Specific Medications	Exclude HICL	
TARGRETIN	V1NA	
TRACLEER	B1BA	
CLOZARIL	H7TB	
TIKOSYN	A2AW	
ACCUTANE	L9BB	
VANIQA	W4KH	
ZYVOX	W1OA	
TAMIFLU	W5AW	
TROVAN	W1QR	
THALOMID	Z2GU	
RELENZA	W5AV	
YOHIMBINE	J7BP	

Specific Medications	Exclude GCN	
PLAN B	93226	
RENOVA	63447	
	89595	
AVAGE	18782	
CLARITIN	60563	
	60562	
	60521	
CLARITIN D	63570	
	63577	
SUBOXONE	18973	
	18974	
SUBUTEX	64672	
	64673	
FLUMIST	19986	
ZAVESCA	19453	
PREVACID NAPRAPAC	20717	
	20718	
CADUET	21391	
	21392	
	21393	
	21394	
	21395	
	21396	
	21397	
	21398	
ERTACZO	43590	
SENSIPAR	21497	
	21498	
	21499	
PEXEVA	20854	
	20855	
	20856	
	20857	
Specific Medications (obsolete that caused issue with TED)	Exclude NDC	
PROGESTERONE POWDER	51552-0005-10	

Footnote Definitions:

1 = May also be subject to Prior Authorization and Medical Necessity determinations

2 = May also be subject to Quantity Limit

Prior Authorizations/Medical Necessity (Reject Code = 75)

Product	Codes	Footnote
Specific Medications	HICL Codes	
ENBREL	S2JA	2
KINERET	S2MA	2
LAMISIL	W3CN	
VIAGRA	A7GA	2
LEVITRA	A7GC	2
CIALIS	A7GB	2
LIPITOR	M4FH	
CRESTOR	M4FS	
NEXIUM	D4JE	
LESCOL / LESCOL XL	M4FA	
ADALIMUMAB	S2JB	2
FOLLITROPINS/ UROFOLLITROPINS	P0BY	2
MENOTROPINS	POBZ	2
Specific Medications	GCN Codes	
SPORANOX ORAL	60823	
EFALIZUMAB	20582	
PENLAC	08040	
HUMULIN 70/30 VIAL	50001	
HUMULIN N VIAL	11660	
HUMULIN R VIAL	11642	
	Reinclude NDC-9	
	00169-1837	
	00169-1834	
	00169-1833	

Footnote Definitions:

1 = May also be subject to Prior Authorization and Medical Necessity determinations

2 = May also be subject to Quantity Limits

Plan Limits (Reject Code = 76)

Product	Codes	Limit
Selected Drugs	Limit HICL	45 day supply
Gleevec	V1QA	

GCN	GENERIC NAME	REFERENCE BRAND	FORM	STRENGTH	UNIT	TMOP LIMITS	Footnote
48793	azithromycin	ZITHROMAX	TABLET	250MG	EA	10 PER 30 DAYS	
48794	azithromycin	ZITHROMAX	TABLET	600MG	EA	24	
06019	granisetron	KYTRIL	TABLET	1MG	EA	24	
20041	ondansetron	ZOFRAN	TABLET	4MG	EA	COLLECTIVE 45	
20042		ZOFRAN	TABLET	8MG	EA		
20045		ZOFRAN ODT	TAB DIS LN	4MG	EA		
20046		ZOFRAN ODT	TAB DIS LN	8MG	EA		
33532	dolasetron	ANZEMET	TABLET	50MG	EA	COLLECTIVE 15	
33533		ANZEMET	TABLET	100MG	EA		
42193	fluconazole	DIFLUCAN	TABLET	150MG	EA	3	
13587	almotriptan	AXERT	TABLET	6.25MG	EA	COLLECTIVE 36	
12472		AXERT	TABLET	12.5MG	EA		
01592	dihydroergotamine	MIGRANAL	AMP W/DEV.	4MG/ML	ML	90 ML	
01590	dihydroergotamine	D.H.E.45	AMPUL	1MG/ML	ML	90 ML	
14977	frovatriptan	FROVA	TABLET	2.5MG	EA	27	
81112	naratriptan	AMERGE	TABLET	1MG	EA	COLLECTIVE 27	
81111		AMERGE	TABLET	2.5MG	EA		
19591	rizatriptan	MAXALT	TABLET	5MG	EA	COLLECTIVE 36	
19592		MAXALT	TABLET	10MG	EA		
19593		MAXALT MLT	TAB DIS LN	5MG	EA		
19594		MAXALT MLT	TAB DIS LN	10MG	EA		
50742	sumatriptan	IMITREX	VIAL	6MG/0.5M	ML	12 ML	
05700	sumatriptan	IMITREX	TABLET	50MG	EA	COLLECTIVE 54	
05702		IMITREX	TABLET	25MG	EA		
05701	sumatriptan	IMITREX	TABLET	100MG	EA	27	
50744	sumatriptan	IMITREX	SPRAY	20MG	EA	COLLECTIVE 18	
50740		IMITREX	SPRAY	5MG	EA		
50741	sumatriptan	IMITREX	KIT	6MG/0.5M	EA	24	
46131	zolmitriptan	ZOMIG	TABLET	2.5MG	EA	COLLECTIVE 24	
46132		ZOMIG	TABLET	5MG	EA		
42098		ZOMIG ZMT	TAB DIS LN	2.5MG	EA		
14324		ZOMIG ZMT	TAB DIS LN	5MG	EA		
18972	zolmitriptan	ZOMIG	SPRAY	5 MG	EA	36	
70025	follitropin alpha	GONAL-F	AMPUL	150 UNIT	EA	24 PER 30 DAYS, NO REFILLS	1
70026	follitropin alpha	GONAL-F	AMPUL	75 UNIT	EA	48 PER 30 DAYS, NO REFILLS	1
90876	follitropin alpha	GONAL-F	AMPUL	37.5 UNI	EA	96 PER 30 DAYS, NO REFILLS	1
13029	follitropin alpha	GONAL-F	KIT	600 U/ML	EA	6 PER 30 DAYS, NO REFILLS	1
57315	follitropin beta	FOLLISTIM	VIAL	75 UNIT	EA	48 PER 30 DAYS, NO REFILLS	1
12921	follitropin beta	FOLLISTIM	CARTRIDGE	300 IU	ML	6.3 PER 30 DAYS, NO REFILLS	1
12922	follitropin beta	FOLLISTIM	CARTRIDGE	600 IU	ML	5.3 PER 30 DAYS, NO REFILLS	1
25950	menotropins	HUMEGON	VIAL	75 UNIT	EA	48 PER 30 DAYS, NO REFILLS	1
25951	menotropins	HUMEGON	VIAL	150U	EA	24 PER 30 DAYS, NO REFILLS	1
25959	menotropins	PERGONAL	AMPUL	75 UNIT	EA	48 PER 30 DAYS, NO REFILLS	1
25958	menotropins	PERGONAL	AMPUL	150U	EA	24 PER 30 DAYS, NO REFILLS	1
92997	menotropins	REPRONEX	VIAL	75 UNIT	EA	48 PER 30 DAYS, NO REFILLS	1
00574	urofollitropin	FERTINEX	AMPUL	150 UNIT	EA	24 PER 30 DAYS, NO REFILLS	1
32322	urofollitropin	FERTINEX	AMPUL	75 UNIT	EA	48 PER 30 DAYS, NO REFILLS	1
94839	urofollitropin	BRAVELLE	AMPUL	75 UNIT	EA	48 PER 30 DAYS, NO REFILLS	1
22961	alprostadil inj	EDEX	VIAL	5MCG	EA	COLLECTIVE 18	
02299		EDEX	KIT	5MCG	EA		
02292		EDEX	VIAL	10MCG	EA		
02294		EDEX	KIT	10MCG	EA		
02293		EDEX	VIAL	20MCG	EA		
02291		EDEX	KIT	20MCG	EA		
22962		EDEX	VIAL	40MCG	EA		
22963		EDEX	KIT	40MCG	EA		

02295	alprostadil pellet	MUSE	SUPP.URETH	125MCG	EA	COLLECTIVE 18	
02296		MUSE	SUPP.URETH	250MCG	EA		
02297		MUSE	SUPP.URETH	500MCG	EA		
02298		MUSE	SUPP.URETH	1000MCG	EA		
57901	sildenafil	VIAGRA	TABLET	25MG	EA	COLLECTIVE 18	1
57902		VIAGRA	TABLET	50MG	EA		1
57903		VIAGRA	TABLET	100MG	EA		1
20258	vardeafil	LEVITRA	TABLET	2.5 MG	EA		
19326		LEVITRA	TABLET	5 MG	EA		
19327		LEVITRA	TABLET	10 MG	EA		
19328		LEVITRA	TABLET	20 MG	EA		
20736	tadalafil	CIALIS	TABLET	5 MG	EA		
18995		CIALIS	TABLET	10 MG	EA		
18996		CIALIS	TABLET	20 MG	EA		
14867	anakinra	KINERET	DISP SYRIN	100MG/0.	ML	28.14 ML PER 42 DAYS	1
18924	adalimumab	HUMIRA	KIT	40MG/0.8ML	EA	6 PER 42 DAYS	1
15173	eletriptan	RELPAK	TABLET	20MG	EA	COLLECTIVE 36	
15174		RELPAK	TABLET	40MG	EA		
20351	butorphanol	STADOL NS	SPRAY	10MG/ML	ML	15 ML PER 45 DAYS	
27200	dornase alpha	PULMOZYME	SOLUTION	1MG/ML	ML	900 ML	
52651	etanercept	ENBREL	KIT	25MG	EA	12 PER 42 DAYS	1
19367	aprepitant	EMEND	PACK	125/80	EA	18	
19365	aprepitant	EMEND	CAPSULE	80MG	EA	12	
19366	aprepitant	EMEND	CAPSULE	125MG	EA	6	
19586	gefitinib	IRESSA	TABLET	250MG	EA	45 PER 45 DAYS	
19948	testosterone buccal	STRIANT	MUC SR	30MG	EA	180 PER 90 DAYS	
12929	fluoxetine 90 mg	PROZAC WEEKLY	CAPSULE DR	90MG	EA	12	
32531	ketorolac	TORADOL	TABLET	10MG	EA	20 PER 30 DAYS	
15666	PEG filgrastim	NEULASTA	DISP SYRIN	6MG/0.6M	ML	1.2 ML PER 45 DAYS	
07221	tramadol and combos	ULTRAM	TABLET	50MG	EA	COLLECTIVE 720	
13909		ULTRACET	TABLET	37.5-325	EA		
17853	tiotropium bromide	SPIRIVA	CAPSULE	18MCG	EA	90	
14633	albuterol	ACCUNEB	SOLUTION	0.21MG/M	ML	COLLECTIVE 1,650 ML	
14634		ACCUNEB	SOLUTION	0.42MG/M	ML		
41681	albuterol	PROVENTIL	SOLUTION	0.83MG/M	ML	1,650 ML	
41680	albuterol	PROVENTIL	SOLUTION	5MG/ML	ML	180 ML	
20110	albuterol	PROVENTIL	AEROSOL	90MCG	GM	102 GM	
22913	albuterol	PROVENTIL / VENTOLIN HFA	AER W/ADAP	90MCG	GM	108 GM	
13456	albuterol/ipratropium	DUONEB	SOLUTION	2.5-0.5/	ML	1,620 ML	
00950	beclomethasone	BECLOVENT	AER W/ADAP	42MCG	GM	160.8 GM	
15793	beclomethasone	VANCERIL DOUBLE STRENGTH	AER W/ADAP	84MCG	GM	129.6 GM	
80128	beclomethasone dipropionate	QVAR	AER W/ADAP	40MCG	GM	87.6 GM	
80131	beclomethasone dipropionate	QVAR	AER W/ADAP	80MCG	GM	43.8 GM	
11720	bitolterol	TORNALATE	AER W/ADAP	0.37MG	ML	90 ML	
20751	bitolterol	TORNALATE	SOLUTION	2MG/ML	ML	720 ML	
17957	budesonide	PULMICORT	AMPUL-NEB.	0.25MG/2	ML	720 ML	
17958	budesonide	PULMICORT	AMPUL-NEB.	0.5MG/2M	ML	360 ML	
27740	budesonide	PULMICORT	AER POW BA	200MCG	EA	6	
46780	cromolyn sodium	INTAL	AMPUL-NEB.	20MG/2ML	ML	1,080 ML	
46970	cromolyn sodium	INTAL	AEROSOL	800MCG	GM	85.2 GM	
00840	flunisolide	AEROBID	AER W/ADAP	250MCG	GM	COLLECTIVE 63 GM	
52861		AEROBID-M	AER W/ADAP	250MCG	GM		
53636	fluticasone	FLOVENT	AER W/ADAP	110MCG	GM	COLLECTIVE 94.8 GM	
53639		FLOVENT	AER W/ADAP	220MCG	GM		
53638		FLOVENT	AER W/ADAP	44MCG	GM		

53633	fluticasone	FLOVENT ROTADISK	DISK W/DEV	100MCG	EA	COLLECTIVE 720
53634		FLOVENT ROTADISK	DISK W/DEV	250MCG	EA	
53635		FLOVENT ROTADISK	DISK W/DEV	50MCG	EA	
50584	fluticasone/salmeterol	ADVAIR DISKUS	DISK W/DEV	100-50MC	EA	COLLECTIVE 180
50594		ADVAIR DISKUS	DISK W/DEV	250-50MC	EA	
50604		ADVAIR DISKUS	DISK W/DEV	500-50MC	EA	
36801	formoterol fumarate	FORADIL	CAP W/DEV	12MCG	EA	180
42235	ipratropium	ATROVENT	SOLUTION	0.2MG/ML	ML	1,350 ML
42230	ipratropium	ATROVENT	AER W/ADAP	18MCG	GM	89 GM
42239	ipratropium	ATROVENT	SPRAY	21MCG	ML	COLLECTIVE 90 ML
42238		ATROVENT	SPRAY	42MCG	ML	
15665	levalbuterol	XOPENEX	SOLUTION	0.31MG/3	ML	COLLECTIVE 1,080 ML
24540		XOPENEX	SOLUTION	0.63MG/3	ML	
24541		XOPENEX	SOLUTION	1.25MG/3	ML	
19712	metaproterenol	ALUPENT	SOLUTION	4MG/ML	ML	COLLECTIVE 1,250 ML
19711		ALUPENT	SOLUTION	6MG/ML	ML	
19710	metaproterenol	ALUPENT	SOLUTION	50MG/ML	ML	180 ML
19701	metaproterenol	ALUPENT	AER W/ADAP	650MCG	GM	84 GM
20302	nedocromil	TILADE	AER W/ADAP	1.75MG	GM	145.8 GM
48020	pirbuterol	MAXAIR	AER W/ADAP	0.2MG	GM	153.6 GM
48021	pirbuterol	MAXAIR AUTOHALER	AER BR.ACT	0.2MG	GM	42 GM
64026	salmeterol	SEREVENT	AER W/ADAP	21MCG	GM	39 GM
64012	salmeterol	SEREVENT DISKUS	DISK W/DEV	50MCG	EA	180
01210	triamcinolone	AZMACORT	AER W/ADAP	100MCG	GM	120 GM
34270	beclomethasone	BECONASE	AER W/ADAP	42MCG	GM	100.8 GM
47102	beclomethasone AQ	VANCENASE AQ	SPRAY	84MCG	GM	57 GM
47100	beclomethasone AQ	VANCENASE AQ	SPRAY	42MCG	GM	150 GM
62998	budesonide	RHINOCORT	AER W/ADAP	32MCG	GM	42 GM
92231	budesonide AQ	RHINOCORT AQUA	SPRAY	32MCG	ML	30 ML
34280	flunisolide	NASALIDE	SPRAY	0.025%	ML	225 ML
62263	fluticasone	FLONASE	SPRAY	50MCG	GM	48 GM
42239	ipratropium	ATROVENT	SPRAY	21MCG	ML	COLLECTIVE 90 ML
42238		ATROVENT	SPRAY	42MCG	ML	
71431	mometasone	NASONEX	SPRAY	50MCG	GM	51 GM
01211	triamcinolone	NASACORT	AER W/ADAP	55MCG	GM	90 GM
01214	triamcinolone AQ	NASACORT AQ	SPRAY	55MCG	GM	99 GM
30629	triamcinolone	TRI-NASAL	SPRAY	50MCG	ML	90 ML
54201	imiquimod	ALDARA	PACKET	5%	EA	36
01851	calcipotriene	DOVONEX	CREAM(GM)	0.005%	GM	COLLECTIVE 900 GM
01850		DOVONEX	OINT.(GM)	0.005%	GM	
01852	calcipotriene	DOVONEX	SOLUTION	0.005%	ML	900 ML
94350	alitretinoin	PANRETIN	GEL	0.1%	GM	180 GM
54561	becaplermin	REGRANEX	GEL	0.01%	GM	45 GM
29222	tazarotene	TAZORAC	GEL	0.1%	GM	COLLECTIVE 300 GM
29221		TAZORAC	GEL	0.05%	GM	

Home injection and insulin needles	Limit HICL X2AB X2AC	Collective 600 needles
Home injection and insulin syringes	Limit HICL X2BD X2BH X2BJ X2BS	Collective 600 syringes
Urine glucose test strips	Limit GC3 R3U	Collective 600 strips

	R3W R3Y	
Blood glucose test strips	Limit GCN	Collective 600 strips
	25200	